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CASE WORK WITH THE AGED IN PUBLIC WELFARE

A Thesis
submitted by
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(S.B., Boston University, 1927)

in partial fulfilment of requirements for

the degree of Master of Science in Social Service

1939

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CASE WORK WITH THE AGED IN PUBLIC WELFARE

1. GENERAL INTRODUCTION

In order to discuss intelligently the thesis that there is a place for case work in the field of public welfare, and particularly with reference to the indigent aged, one must first present a brief review of public welfare trends in Massachusetts, showing the gradual, but inevitable, rise of interest in the problems of the aged, and the comparatively recent spurt occasioned by the passage of the Federal Social Security Act. This interest has by no means reached the point where it will remain indefinitely: the problem is a dynamic one, constantly changing in emphasis and scope. Even today, at the beginning of the year 1939, the word "reorganization" is heard on every side. The battle between State and local control rages fiercely, and those most vitally interested -- the old folk of Massachusetts -- sit numbly by for the most part, hoping for a satisfactory solution.

A. Brief history of public welfare in Massachusetts

Massachusetts has always held an enviable position, in relation to the situation in other states, in the care of its needy poor, whether infant or aged. In the past three hundred years the concept of public welfare has changed

materially from the old Elizabethan Poor Law, although the elimination of the word "pauper" -- at least the transition to a less derogatory interpretation -- dates back to less than thirty years. As originally administered, public relief was divided into two classes: outdoor and indoor. And the "door" in each case was a real door, that of the town farm, or, as it used to be called, the "poor house". Outdoor relief was synonymous with family assistance; that is, a family "on the town" was cared for in the disreputable quarters it called "home" with a small grocery order, an inadequate clothing order, and a meager supply of fuel. Indoor relief, the sheltering of individuals in an institution at public expense, embraced those persons having no relatives, as, for example, childless couples or unmarried individuals unable to support themselves. Although *per capita* costs often present an unfair picture, it is interesting to contrast the indoor relief figures of 1900 and 1936, showing a rise from $1.00 to $32.61 for every person supported in an institution at public expense. Equally interesting is the contrast in percentages: in 1900, only one out of every 1,500 was in an institution, while in 1936, 23.38 per cent of the population was dependent.[1] These figures are quoted because the inmates of the town farms were to a large extent old people -- the group for whom old age legislation was designed.

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[1] Bardwell: Social Security in the U.S. 1938, p.24.

To any student of the changing status of public welfare in Massachusetts, it is evident that a definite policy regarding categorical relief was manifesting itself. "Pauperism" as an inclusive term was gradually breaking down. The first indication of this was in 1888 when the veteran received a separate status and military and soldiers' relief were incorporated in the laws of Massachusetts. A period of status quo existed until 1911, when the original concepts of charity and condescension began to develop into larger concepts of public welfare and rehabilitation. The entering wedge was the passage of an adequate public welfare law, and two years later another division of relief appeared under the term "mothers' aid". Again, in 1919, human need dictated still another subdivision -- this time covering the care of the blind by granting separate pensions. Nevertheless, it was not until 1931 that the aged poor of Massachusetts received a definite status and old age assistance became a part of the public welfare program.

B. The growth of interest in the problems of the aged

That this legislation sprang full grown into being on July 1, 1931, is not to be imagined. Its progress was slow and tortuous, with many a detour around public indifference and apparently exorbitant expense, before its goal was reached. Its progress is still slow, but the road already traveled is well marked, and trained surveyors are mapping

out new and better roads to follow.

1. The rise of the town infirmaries

It has been the writer's great good fortune to have been associated, both as an employee and as a friend, with Mr. Francis Bardwell, who directed the administration of the Massachusetts Bureau of Old Age Assistance from its inception in 1931 until December 1937, when he retired, and to have absorbed a little of his mellow philosophy. Probably no other man in Massachusetts has as keen an appreciation of the problems of the aged as he. For over twenty years he was closely connected with this field of public relief. Often he attempted to revise the existing feeling governing the admission of old people to the almshouses which he visited in his function of State relief official. Too often he found in them people who did not belong there. True, they were without means of support and were economically dependent, but they possessed a native independence which little fitted them for institutional care. When the old age assistance law finally became a fact in Massachusetts, Mr. Bardwell said:

> "Because of it, aged people can be placed so that the element of happiness enters into their everyday life. Life, with a reasonable amount of consideration as to how they want to live it; to preserve their independence of spirit -- to still be somebody; to live where they will be in daily contact with others who will show them little kindly attentions, or in an environment where there are little children; where the world treats them with the courtesy with which they treat the world, or where they can discuss their past

with attentive listeners; near the church of their choice and enjoying the peace that should come with the close of a life of struggle."[1]

To talk with Mr. Bardwell was a liberal education. To hear him trace the gradual interest that developed in the general public made a deep impression on his listeners. From the first "friendly visitors" -- big-hearted women who would give up an afternoon or two every week to visit the shut-ins at the town farms -- to the modern trained social workers is a long step, but it was through these first visitors that the cause of the old people was spread and needed reforms were accomplished. From inadequate shelters, where unfortunates were herded together under harsh wardens and matrons, where food was poor, conditions crowded and unsanitary, to the present cheerful, well-cared-for premises of the modern town infirmaries, where hospital facilities are often excellent, and the wardens and matrons are friends rather than jailers, is an excellent commentary on the crusading work of these first visitors. But institutional care, no matter how well administered, can never take the place of a person's own home, no matter how humble. Some sort of pension plan was needed.

2. Proposed old age legislation prior to 1930

The first general old age pension plan to be presented in the Massachusetts Legislature was in 1903 -- House No.

[1] Conant: Old Age Assistance: The Massachusetts Plan. (Reprint) p.6.

1023 -- which provided for "state pensions for the aged and infirm", applying only to male voters, sixty-five years of age or over, and specifying a grant of $72 a year. In 1904, House No. 1014 was presented and called for "a system of old age pensions", which later reappeared as House No. 1362, with provisions for weekly payments of $2 to all male citizens over sixty-five, subject to certain qualifications. The next year this bill made a new appearance as House No. 301 and House No. 1042. Such changes as were made applied only to the qualifications mentioned above. This same bill appeared for a third time, in 1906, with further changes, as House No. 874. This time the most important change was the raising of the age limit to seventy years, although a substitute bill, House No. 1050, lowered this again to sixty-five and increased the allotment to $3 per week. In the same year, House No. 263, entitled "An act to establish a system of old age pensions" was introduced. In this the age was lowered to sixty and the amount recommended was $30 a month. In 1907, House No. 1050 of 1906 again appeared as House No. 275, in 1908 as House No. 1028, and again in 1909 as House No. 628. In 1909, too, House No. 393 was presented, entitled "An act to authorize cities and towns to grant pensions to certain of their citizens". The age limit was fifty-five and provided for a grant of not more than $5 a week.

During this period of rising interest in the problems of the aged, private individuals also proposed annuity sys-

tems -- notably Magnus W. Alexander of the General Electric Company, Augustus P. Loring, Esq., and Sir John Pilter, an Englishman living in France.

The first real impetus given to the search for a solution of the pension puzzle dates from January 14, 1907, when Representative Bernard J. Ferber introduced a "resolve to provide for an investigation and report relative to the adoption of a system of old age insurance and pensions", calling for the appointment of a commission of five persons to serve without pay, who were to report on or before January 15, 1909. The expense of this investigation was not to exceed $2,500. On June 4, 1908, a resolve "to provide for the expenses of the commission on old age insurance and pensions" -- allowing for the expenditure of a sum not to exceed $15,000 -- was laid before the acting Governor, and on June 9, 1908, this resolve had "the force of a law", since it was not returned by him within the five-day period. On January 18, 1909, a resolve "extending the time for the final report of the commission appointed to investigate the various systems of old age insurance, pensions, and annuities" until January 15, 1910, was approved.

The final report, as transmitted on January 15, 1910, was the joint work of Magnus W. Alexander as Chairman, James T. Buckley, Mrs. M. R. Hodder, Arthur M. Huddell and Walter G. Chase. Professor F. Spencer Baldwin was Executive Secretary. The plan of investigation was to answer three general

questions:

1. What are the various systems of old age insurance, pensions, or annuities proposed or adopted in this Commonwealth, or elsewhere?
2. Is it advisable to establish a system of old age insurance, pensions, or annuities in this Commonwealth? and
3. As a special phase of the preceding question, what would it cost to take such action?

A statistical study of the aged poor in Massachusetts included a partial census of the aged population of the Commonwealth. Since sixty-five is the age used in most pension systems, and seventy is the age limit in Great Britain and Germany, two separate counts were made.

A comparative study was undertaken of the various forms of relief, including almshouses, benevolent homes, public and private outdoor relief, state and military aid, soldiers' relief, and United States pensions. The non-dependent poor were also investigated -- that is, persons over sixty-five who were not dependent on charity, but who would be entitled to share in the benefits of any system of old age pensions. A striking fact shown by this investigation was the large percentage of individuals having incomes below $5 weekly. Comparative social statistics were drawn, regarding:

1. Sex and conjugal condition
2. Length of residence in Massachusetts
3. Family connections
4. Nativity, whether native or foreign born
5. Political status of foreign born males
6. Defective physical conditions
7. Earning power
8. Occupations
9. Weekly wages

10. Property holdings
11. Property losses, and
12. Present financial condition.

Not the least of the work of this commission was the excellent account of existing systems of old age pensions, each of which was adequately analyzed. Pension legislation in the United States also received full consideration, both as it related to military pensions by the United States government and to pensions to firemen, policemen, teachers, and other public employees in the various states. The pension systems of certain railroads and industrial corporations were also studied, as were the old age benefits of fraternal organizations and trade unions. Insurance plans also came within the scope of the commission's investigations.

A clear analysis of existing and proposed schemes was presented, the six main types being:

1. Universal non-contributory pension schemes
2. Partial non-contributory pension schemes
3. Compulsory contributory insurance, with state subsidy
4. Voluntary contributory insurance, with state subsidy
5. Voluntary insurance under public administration, and
6. Voluntary insurance under private management.

It detailed arguments pro and con, contrasting contributory against non-contributory, voluntary against compulsory, and universal against partial schemes.

The final conclusions of the commission were, in part: "...it would be inexpedient for Massachusetts or any other state to adopt a general system of ald age pensions, either

at the present or at any time in the future.....Furthermore, there is no considerable demand in this State for the establishment of a general scheme of old age pensions or insurance."[1]

In 1914, Governor Foss appointed another commission, composed of James E. McConnell, Magnus Alexander, and Henry S. Dennison, to investigate the subject of pensions, including both public and private employees. This commission's report, supporting the findings of the previous commission, concluded that no general old age pension plan was advisable. It recommended, however, that the facts regarding the possible need of old age pensions in Massachusetts be established by an investigation to be undertaken in connection with the census of 1915. The Legislature, therefore, enacted a bill to this effect, and much pertinent information was obtained regarding the number of individuals over sixty-five years of age (5.1 per cent of the total population), sex, marital status, average length of residence in Massachusetts (which was very high -- 80.3 per cent being residents for thirty years or more), and other valuable statistical data. The investigation elicited no information relative to the financial condition of those individuals over sixty-five who were not aided either by public or private charities, nor did it specify citizenship status.

In 1916, a commission of nine members was appointed to

[1] Commonwealth of Massachusetts, House No. 1400 (1910), p.322-323.

study social insurance possibilities in Massachusetts, as related to sickness, unemployment, destitution in old age, and the general problem of poverty. In this connection, contributory causes of economic dependence were listed as: feeblemindedness, insanity, alcoholism, lack of vocational training, and lack of thrift training. A majority of the members recommended the principle of non-contributory old age pensions, the arguments advanced being that such a system was the right of good citizenship, that this protection was humane and equitable, and that charity instead of old age pensions was ill fitted in a country dedicated to the welfare of its people.[1]

While various other bills made their appearance in the Legislature from 1916 on, it was not until May 5, 1923, that another commission was created. This one was established "for the purpose of considering the entire problem of pensions, whether to officers or employees retired or retiring from public service, or to persons in private life who, by reason of injury or otherwise, are no longer able to support themselves in gainful occupations...." This commission was instructed to report its findings on the first Wednesday in January, 1925, but the time was subsequently extended to November 1, 1925. A preliminary report was submitted on February 14, 1925, covering pensions for public employees, teachers who had retired prior to the adoption of the Teach-

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[1] Commonwealth of Massachusetts, Senate No. 5 (1925), p.251.

ers' Retirement Act, and for veterans in the public service. The final report, which discussed only the subject of general old age pensions, was transmitted on October 31, 1925, by a commission composed of Frank H. Hardison as Chairman, Minnie R. Dwight, Charles J. Mahoney, Royal Robbins, and Allyn A. Young.

This report was a full and comprehensive survey of the system of pensions, including information regarding the number of persons who would be entitled to benefits, the probable initial expense, the estimated expense during a period of twenty-five years, and the probable effect on the amount of money expended by public and private charities. It also contained statistical tables showing the expenditures of the Commonwealth for the previous twenty-five years in the fields of mothers' aid, juvenile and poor relief, and in all other forms of public aid.

The majority findings of this commission recommended an act to provide for old age assistance to applicants who had attained the age of seventy or upwards, who had been citizens for at least twenty-five years before making application for assistance, and who had resided in the Commonwealth for twenty years continuously, except for absences totaling not more than three years, or for forty years with at least five years continuous residence prior to application. Other provisions were made covering previous penal records, desertion from husbands or wives, professional

mendicancy, and legal financial responsibility of children and other relatives. Property qualifications and previous earning ability were also recommended for consideration. This act was scheduled to become effective on September 1, 1926, no payments to be made before January 1, 1928.[1]

The minority findings recommended the enactment of a law to "discover and minister to the needs of aged citizens", defining "aged citizen" as a citizen seventy years of age or over who had resided continuously for fifteen years in Massachusetts immediately prior to the application for aid. It also provided for an appeal board, the elimination of the word "pauper", and reimbursement by the Commonwealth for one-third of the assistance given in settled cases, while total reimbursement was recommended in unsettled cases.[2]

3. Old age legislation in 1930

Finally, in 1930, a bill was presented, entitled "adequate assistance to certain aged citizens", which passed both branches of the Legislature, and became effective July 1, 1931. The fundamental requirements for assistance were: citizenship, a minimum age of seventy years, and twenty years' residence in Massachusetts. Various policies of the Department of Public Welfare were established as to the

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[1] Commonwealth of Massachusetts, Senate No. 5 (1925) p.18-21.

[2] *Ibid.*, p.34-35.

ownership and amount of equity in real estate, the amount of insurance carried, and so forth. From time to time, in 1932, in 1933, in 1935, and again in 1936, this law has been amended to meet the exigencies of the times and to comply with the requirements of the Federal Social Security legislation.

Administration of this law was vested in a new bureau - the Bureau of Old Age Assistance -- in the Division of Aid and Relief of the Massachusetts Department of Public Welfare. A superintendent was named, Mr. Francis Bardwell, and the work of the Bureau began July 1, 1931. The entire Commonwealth was divided into districts, and twenty-four social workers, popularly called "visitors", were appointed to care for the estimated case load of eight thousand applicants. Almost immediately the corps of workers proved inadequate, as some twenty-four thousand applications poured into the State headquarters from the local offices, and additional workers were employed from time to time. There are at present fifty-one full time visitors employed in the Massachusetts Bureau, caring for an approximate case load of seventy-six thousand recipients.

C. The Social Security Act

Up to now, the problem of old age assistance has been treated in this paper as it applies to the Commonwealth of Massachusetts. The problem of the care of the aged, how-

ever, has been in the forefront of the public mind for many years, and in 1915 Alaska adopted an old age assistance act. Similar acts had been passed in California, Kentucky, Maryland, Minnesota, Montana, Nevada, New York, Utah, Wisconsin, and Wyoming before 1930. As of May, 1938, there were fifty-one such acts in effect in the United States and its possessions.[1]

1. In the United States

The Seventy-fourth Congress of the United States approved on August 14, 1935, the Social Security Act, designed to benefit the wage earners of this country. primarily, the bill provided for a system of old age benefits to aged, needy persons over sixty-five years of age by Federal grants on a fifty-fifty matching basis with the different states, except that the Federal government's share in no case would exceed $15 a month. It also provided for a contributory old age pension system to be paid for by an income tax on employees and a payroll tax on employers, which began with one per cent in 1937, and rose each three years, so that by 1949 the contribution from both would be three per cent. It also sought to encourage the development of a Federal-State system on unemployment insurance through a payroll-excise tax paid to the Federal treasury solely by the employers, with proportionate reimbursement by the Fed-

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[1] American Association for Social Security: Social Security 1938, p.242.

eral government.

Additional forms of aid applied to needy dependent children, to health programs for mothers and children, to crippled children, to vocational rehabilitation, and to the maintenance of adequate public health services. By the end of 1936, forty-one states, as well as Hawaii and the District of Columbia, had accepted its provisions and were cooperating. In December of that year some 1,439,600 individuals were participating, of which 1,117,200 were aged, 32,160 blind, and 290,240 were dependent children.

On May 24, 1937, the social insurance provisions of the Act were held by the Supreme Court to be constitutional, and by the end of the year thirty-six million wage earners had accounts under the old age insurance program. On the sole basis of need over 2,100,000 individuals were participating in the Social Security Act as either aged, blind, or as dependent children.

Since, in this paper, we are chiefly concerned with old age assistance, it might be interesting to consider provisions of the Act in the various states. In compliance with the Social Security requirements, the age limit is uniformly sixty-five years of age, or will be reduced to this minimum as of January, 1940. At the end of 1937, all the states of the Union, including Alaska, the District of Columbia, and Hawaii, except Virginia, had old age assistance legislation, covering 1,582,155 recipients (an in-

crease of 472,665 over the previous year), at a total cost of $311,661,208 for the year. Comparative figures for Massachusetts show a total of 64,893 recipients at a cost of $19,210,809, or an average grant of $27.94.[1]

The maximum allotment ranged from $15 a month in Kentucky and Mississippi, to $45 a month in Colorado, while Washington set a minimum of $30. Nine states have set no maximum, including Arkansas, District of Columbia, Kansas, Louisiana, Massachusetts, Montana, New Hampshire, New Mexico, and New York. Twenty-eight states require citizenship, while four states substitute residence requirements of from fifteen to twenty-five years, the remaining nineteen states or territories requiring no citizenship.

2. In Massachusetts

With the passage of the Federal Social Security Act, a great increase in the welfare services of the various states became possible. The field of activity in Massachusetts now includes all age groups from infants to old folk, and includes assistance to blind persons, vocational rehabilitation, recreation, and housing. In relation to the work with the aged, in the period from February 1, 1936 to June 30, 1938, the Federal government has contributed cash grants totaling $20,000,000, and the case load has increased from 26,000 to 71,500 during the same period.[2]

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[1] American Association for Social Security: Social Security 1938, p.244-245.

[2] Pearson: Notes on Social Welfare Services in the U.S.

D. Present status of old age assistance in Massachusetts

In accordance with the provisions of the Federal Act, in 1936 the essential requirements were amended, and the following substituted: citizenship, a minimum of sixty-five years, and five out of nine years' residence in the Commonwealth. Great latitude, too, has been established in the policies regulating property ownership and insurance. In 1931, a recipient was allowed an equity of not more than $1500 with no cash or securities, or of $1200 with $300 in readily nogotiable personal property, that is, a total of $1500. Insurance on the life of a recipient not exceeding $500 was permitted, and absence from the Commonwealth necessitated a suspension of aid until the individual returned. In 1936, a $2000 equity in real estate and $1000 in life insurance were permitted. Today, a citizen of Massachusetts, having complied with the essentials regarding age and residence -- substantiated by documentary evidence -- may receive assistance providing his equity in real estate does not exceed $3000. Ownership of property in which the equity exceeds this amount is allowed, subject to the signing of a mortgage and mortgage bond covering the excess amount. Insurance or benefit certificates, with stated limitations, may be carried up to a maximum of $3000. An absence of thirty days from the Commonwealth, in any calendar year, is now allowed without suspension of aid. Those provisions of the original law of 1931 pertaining to

the ownership of cash or securities to the amount of $300, and actual residence in property assessed in the applicant's name remain unchanged.

2. A STUDY OF CERTAIN CASES IN MASSACHUSETTS

In Massachusetts, the Bureau of Old Age Assistance functions under the Division of Aid and Relief, which, in turn, is an integral part of the Department of Public Welfare. While it is more than probable that the present set-up will be changed in the near future, in order to understand the place of case work in connection with the aged, it is necessary to explain briefly the procedure as it now exists.

A. Description of the Massachusetts set-up

The Superintendent of the Bureau not only interprets the law *per se* to his staff, promulgating the rulings as made periodically by the Attorney General, but literally superintends the administration of the law throughout the Commonwealth, through the individual local Boards of Public Welfare. In the Bureau proper, the Superintendent is the chief administrator, working directly in conjunction with the Director of the Division of Aid and Relief and with the Commissioner of Public Welfare. There are, at present, two head social workers in the State headquarters, one covering the eastern, the other the western, part of the Commonwealth, who supervise the activities of the present staff of fifty-one visitors. An adequate office personnel is maintained at the central office, consisting of a receptionist, a secretarial and stenographic staff, a settlement

clerk, competent file clerks, and an efficient auditing department. A friendly, cooperative atmosphere exists, and the visitors defer to the head workers' suggestions in particularly complex problems. Ordinarily, the visitors are "on their own" in the interpretation of the Department's policies in their respective districts.

The Board of Public Welfare in each city and town of the Commonwealth has established a Bureau of Old Age Assistance, the personnel of which is directed -- theoretically, at least -- by the State visitors in the proper procedures, as to verification of essentials (i.e., age, citizenship, and residence requirements), the meeting of various State department regulations, and the adequacy of the budgets allowed. Applications received by the local Bureaus must be filed with the State department within ten days in order that claims for reimbursement, as provided for in the Federal Act, may be allowed. With the tremendous increase in the number of recipients, the duties of the State workers have multiplied rapidly. The local Bureaus have increasingly complex problems to be presented for solution, with a corresponding increase in the supervisory work of the visitors.

When the writer joined the State staff early in 1933, she was assigned to a district in the western part of the Commonwealth, comprising, for the greater part, a distinctly rural population. Here the task of guiding the local

Bureaus was quite complicated, since Massachusetts does not function on a county basis, but as some three hundred and fifty individual units. Since in the smaller towns the Board of Selectmen and the Board of Public Welfare are identical, and local politics provides for an almost complete turn-over of officials each year, the State visitor had of necessity to instruct a new board (whose only qualification for the administration of public assistance was native Yankee shrewdness) in the policies and procedures of the administration of old age assistance every year. In addition, training had to be given in case work skills, in the establishment of rapport between the local investigators and the clients, in the determination of budgets, based on adequate minimum standards, and in the thorough investigation of qualifications. Because of the diversified interpretations of the law that existed in a comparatively small geographical area, wherein might be six or eight local governments, the influence of the worker was very great, since a relatively uniform interpretation meant more efficient administration of the law in the district concerned. When the author was transferred, in 1936, to the eastern part of the State, with its more concentrated suburban and urban population, still other problems had to be met, not the least of which was the combatting of organized political machines with their concomitant political pressure.

pressure.

B. Case work procedures

The approach in old age assistance case work differs materially from that in other fields. Mary Richmond, in "What is Social Case Work?" advances, as a tentative definition: "Social case work consists of those processes which develop personality through adjustments consciously effected, individual by individual, between men and their social environment"[1] -- and emphasizes that social environment is not environment in space only, but that the horizon of man's thought is widened to the boundaries of his capacity for maintaining relationships, and excludes all those things which do not really influence his mental, emotional, and spiritual life. In the Milford Conference Report, the following definition is given: "It deals with the human being whose capacity to organize his own normal social activities may be impaired by one or more deviations from accepted standards of normal social life".[2]

In old age assistance, the main deviations from the normal lie in three areas -- economic, medical, and emotional. And in most cases, medical and emotional maladjustments are secondary to economic dependency. One more deviation from ordinary family case work lies in the age of the clients: they are all over sixty-five years of age. And

[1] Richmond: What is Social Case Work?, p.98.
[2] Milford Conference Report, p.16.

because of this the medical problems are usually those connected with the chronic diseases of senescence, while the emotional problems are also of senile origin. Old people are as difficult to deal with as children -- and are just twice as "set" in their thinking processes. Their basic needs, however, are no different from people in younger age groups; they all seek recognition, affection, security, companionship -- they all suffer from hunger, lack of physical needs (i.e., food, clothing, shelter, and amusement) -- they all desire health, spiritual comfort, and their legal rights.

Quoting again from the Milford Conference Report, we find as "distinctive requirements" for family case work the following:

1. A knowledge of the minimum essentials for keeping a family together.
2. A knowledge of home management.
3. An ability to estimate the significance and to make use of the implications of different national cultures.
4. A knowledge of the effect of migrancy on family life, on individuals temporarily cut off from their families, etc.
5. An understanding of an ability to deal with the psychology of economic failure.
6. A knowledge of the effect of permanent removal from one demographical setting to another.
7. Skill in administration of relief to families.
8. An understanding of and ability to deal with the psychology of enforced idleness.

9. Special equipment for dealing with unemployed persons.[1]

The public worker too often underestimates the need of training in dealing with people receiving public relief, and the worker with the aged often decides that the mere giving of a cash allotment is all that is necessary. The requirements quoted emphasize the fallacy of this belief. Again and again, the writer has heard colleagues declare: "All you need to do this job well is horse sense." These workers are not social workers -- they are "doing a job" for what they themselves may get out of it in the way of financial return -- they are not concerned with influencing social behavior. But because every real social worker must influence social behavior, even though techniques may differ, training is essential. Because minimum standards are not required under Civil Service, and because many workers had no technical training, Mr. Bardwell evolved, out of his broad sympathy and experience, certain "points" which he instructed new workers to use. Some of these were:

1. Diplomacy in the angle of approach. The applicant's first impressions are hard to overcome.
2. Courtesy is indispensable. Old people expect it.
3. Inspire confidence.
4. No patronage. The aged scent it.
5. No harshness.
6. Be a good listener. It takes patience and time.

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[1] Milford Conference Report, p.36.

7. Have a sense of humor.

8. Have a pinch of sentiment.

Using these as a basis, the individual workers gradually develop highly specialized skills. The interview of persuasion in the hands of a trained worker becomes a thing to marvel at. To attempt to classify techniques or to isolate particular skills is an impossibility. The main thing to seek is to adjust the individual to his environment by modifying the environment, or the attitude of the individual towards conditions which cannot be altered.

Many of the skills developed, while somewhat unorthodox when judged by social work standards, have nevertheless proved their efficacy. No two cases can be treated in the same manner; each case must be judged on its own merits.

One of the chief differences between public and private case work is in the case load carried. In the writer's own experience in ten years' of public agency employment, the load has varied at different times and in different districts from eight hundred to twenty-two hundred cases. With the smaller load it was possible for the visitor to make quarterly revisits and maintain a fairly close contact with all the clients. Problems were followed up consistently and definite results could be evaluated, even though the work was primarily palliative. With a case load of approximately two thousand, the visitor has been forced to discontinue revisits except in problem cases.

Possibly a resumé of the usual form of procedure in applying for old age assistance may explain the visitor's function more intelligently: The client applies to the local Bureau, presenting proof of the essential data, and as soon as this has been verified, a duplicate of the original application is forwarded to the State department office within ten days, and the case is then referred to the State visitor. The interval between the date of receipt of the notice and the date of the first visit varies, depending upon the case load of the individual visitor, but usually the interval is seldom longer than a month. Of course, the local visitor has made an initial investigation to the home and his findings are on file at the local office, where the State visitor can consult them easily. The State visitor not only examines this file, verifying the essentials, but passes upon the adequacy of the budget and submits recommendations for increases, decreases, or continuances of the aid granted in every case. Failure by the local Board to submit documentary proof of the eligibility of the applicant automatically absolves the State department from any responsibility for reimbursement until such proof has been obtained. A visit is made to the home of the recipient to check on living conditions, bank accounts, health, ability of children to assist financially, and other pertinent data. At this time, the State worker attempts to clarify in the client's mind just what old age

assistance is, and what its receipt means to the individual, to the local Bureau, and to the taxpayers of the Commonwealth. Settlement is a big factor in the reimbursement granted by the Commonwealth; so the State worker must also take a complete residence history in disputed cases.

It is the contention of many people, including State department officials and many visitors themselves, that there is no place for intensive case work in the public field. The work of the visitors is for the most part supervisory with relation to the local Boards -- their chief qualifications appear to lie in the areas of detection and auditing. The local visitors or investigators are supposed to accomplish whatever case work is necessary, and the need is not supposed to be very great. As a matter of fact, the need is far greater than has been estimated. True, in a large number of cases the giving of a cash grant is all that is necessary -- and in these cases the recipients work out their own salvation. But what of those other cases?

C. Common problems

As the writer has already stated, the reason for applying for old age assistance is invariably due to economic distress, although there are always a few who apply because of the feeling that it is a "legal right" and the State owes it to them. There are also a few typical "welfare" clients: that is, persons who have never been self-supporting and

who have always had to be aided. By far the greater number of applicants, however, are those for whom the legislation was enacted -- deserving aged residents who have been responsible citizens, and who, in their declining years, have been deprived of the means of obtaining a livelihood, either by loss of employment because of old age, by ill health, by the unemployment or death of children who would ordinarily have supported them, by foreclosure of property, or by other loss of income.

With the first group cited it is generally difficult to establish rapport; these people often have assets which they attempt to hide, and all too often refuse to cooperate with either the State or local visitors. With the second, the problem is merely to see that their living conditions are adequate and the necessities of life provided. In the third group, however, there is more frequently a drop in morale; they tend to become apathetic or are sometimes abjectly grateful for the friendly interest displayed by the case worker. It is in this group that real case work is accomplished: here the worker attempts to re-establish self-respect and to remove the stigma which they believe is associated with the receipt of aid of any kind.

The care of the aged is a dynamic problem, one which is in a state of constant flux, and which demands intelligence in recognizing difficulties and determining solutions. Seldom is any one problem encountered alone; inevitably it

is complicated by other factors. The main cause of dependency in the majority of cases is economic -- and as stated on the preceding page, such economic insufficiency can usually be traced to loss of employment by the client, to ill health, or to the loss of natural supporters. Contributory causes include lack of thrift in early life, loss of savings, congestion in modern living conditions, and, in a relatively few cases, chronic alcoholism. "In-laws" are responsible for many of the emotional problems which the social worker must try to solve.

But before the social worker is called upon to solve specific problems, whether due to economic stress or personal inadequacy on the part of the client, many problems arise from the interpretation of the law itself. Referring to the act as it appears in Chapter 118A of the General Laws of the Commonwealth of Massachusetts, we find it phrased as follows: "Adequate assistance to deserving citizens in need of relief and support, sixty-five years of age or over, who shall have resided.....Such assistance shall, wherever practicable, be given to the aged person in his own home or in lodgings, or in a boarding home....at a rate not less than thirty dollars monthly for each recipient... In computing the above minima the local board or the appeal board....shall deduct therefrom the amount of income the person....may be receiving from any source whatsoever... and may deduct...such reasonable amount as may be deemed to

represent the financial value of board which is being furnished....or should be furnished to him by his children.."[1]

In this brief excerpt several debatable points appear, which frequently become problems of some magnitude, the settlement of which requires considerable skill on the part of the visitor.

"Deserving citizen" -- just what constitutes a deserving citizen? In defining this phrase, the State department contends that present habits are of more importance than past records, and generally gives the applicant the benefit of the doubt when any question arises. In cases found to be undeserving because of actions while receiving old age assistance, such as an arrest for drunkenness, a penal period of one year is usually put into effect and aid suspended. If, at the expiration of the probationary term, the applicant has demonstrated that he has lived a fairly exemplary life, the case is re-opened.

"In need of relief" is another pertinent point. The present law is not a pension and cannot be construed thereas. The fact that a person has reached sixty-five years of age does not entitle him to a cash grant of thirty dollars a month if he can support himself. As the law is interpreted in Massachusetts today, need must be proved. Again the State worker is often forced to discontinue assistance when such proof does not appear, and again definite case

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[1] Manual of Laws, Department of Public Welfare, p. 52.

work technique is needed to convince the recipient that no discrimination exists.

"In his own home or in lodgings" has occasioned considerable controversy. What of the aged and infirm person unable to live alone or in a lodging house? Who will see that proper care is given him? Is the local Board ever justified in forcibly removing a person to a boarding or nursing home? Again the "interview of persuasion" must be used to attain rehabilitation of the recipient.

"Not less than thirty dollars a month" is another bone of contention. Tact is indeed needed in interpreting this phrase to the client. The fact that the law modifies this statement by providing that the local Board shall deduct any resources the individual may have, is a difficult one to impress on the senile mind. And even harder to impress on the minds of children who are "fighting for father's rights"! The State visitor is often called in when the local Board finds it impossible to convince a recipient of the legality of a smaller grant, and again case work techniques must be utilized.

And lastly, the phrase "should be furnished by his children" stands as the cause of one of the biggest problems we have. In spite of repeated efforts on the part of our legislators in Massachusetts filial responsibility has not been removed from the old age assistance law. Probably this next year will see its removal. But until it is eliminated,

the State department will continue to temper justice with mercy, as it has in the past. It may be argued that in respect to the statute whereby any Board of Public Welfare may bring children before the Court on a non-support charge, the State has been overly lenient. The local Board invariably puts the matter up to the injured parent, and paternal pride usually negates any legal action. However, the mere threat of such action by the local Board often attains the desired results -- at least temporarily.

Apart from these general problems involving the interpretation of the phraseology used in the old age assistance law itself, certain other problems, common to the majority of cases, appear. These may be listed briefly as:

1. Economic
2. Medical
3. Emotional, and
4. Housing.

Under the heading "emotional" we may group two subdivisions, (a) personal inadequacy and (b) family situations -- which, in turn, may be due to "in-law" problems or refusal of children to accept responsibility.

D. How these problems are being met in Massachusetts

As proof of the thesis -- that case work is necessary in connection with old people who are receiving public assistance -- the writer has chosen as a field of inquiry two suburban communities in Massachusetts: one, a city of

24,000 population, the other a town of 16,000. For purposes of comparison these two communities will be designated as "A" and "B". The average old age assistance case load in "A" is about 325, with an average grant of $27.52 monthly; in "B", about 225, with an average grant of $23.36.

Two hundred cases have been chosen at random, 100 from "A" and 100 from "B", and analyzed in an attempt to show what problems exist, how they are being met, and what results have been achieved. Each group will be considered separately.

1. In an urban community

Of the one hundred cases chosen, a careful analysis of the primary problems involved gives the following percentages: economic,57 per cent; medical, 22 per cent; emotional, 13 per cent; and housing, 18 per cent. Using these one hundred cases as representative of the 325 active cases, roughly, then, in a city of 24,000 about half of the individuals whose applications for old age assistance were accepted applied because they had no income whatsoever, or else because their income was insufficient to allow for their normal expenses.

In these cases, the only case work necessary was to assist them in the making of a budget, and to educate them to the fact that the aid granted would permit them to live adequately although not luxuriously.

Certain items appear on every budget: rent, or property charges; food; fuel; gas and electricity; clothing; medical expense; and miscellaneous expense. Other legitimate charges may be included if necessary, as insurance, laundry, and even the cost of a telephone. In the city of "A" certain of these expenditures are more or less standardized: an allowance of $13 per month per person for food, or $25 per month for two people, seldom varies; $3 per month for gas or electricity, or a total of $5, is considered adequate. Under the policies of the State department, carrying charges on property of over $30 a month are not allowed. Carrying charges include taxes, interest on mortgages, payment on principal, water rates, and fire insurance premiums. Income from rentals is also considered in computing carrying charges although room rent or board from children living in the home cannot be counted.

Of the cases involving medical problems primarily, four were in a nursing home, where they were receiving bed care, one at the rate of $70 a month and three at $65 a month; seven others were receiving bed care in the homes of friends or relatives at a rate of $40 a month; ten were in their own homes, able to care for themselves, and were receiving $30 a month, plus medical expense. The latter did not include physicians' fees because "A" employs a city physician. The remaining case was being cared for in the hospital, at a flat rate of $3 a day. (This client was

later removed to a nursing home at $65 a month, where she remained until her death.)

Of the thirteen cases classified as emotional problems, two were typical of personal inadequacy, four were induced by strained relationships with sons- or daughters-in-law, and seven resulted from the refusal of children to accept financial responsibility. It is in this group that the greatest field for case work exists, and where actual case work is being done.

The remaining 18 per cent presented problems due to inadequate housing facilities. Here, too, the possibilities for constructive action are great.

From these one hundred cases, the writer has selected ten for more intensive analysis of the case work involved. These ten cases have been chosen to illustrate just what has been done; no doubt opportunities have been neglected in some instances, and too paternalistic an attitude adopted in others. It is the intention of the writer to study these cases as dispassionately as possible and evaluate the results achieved.

Case 1. A woman, Mrs. E.H., aged 67, born in Germany and naturalized through marriage to a native born American citizen, from whom she has been separated for ten years. She has been on the welfare rolls of various cities and towns of the Commonwealth since 1912, her husband having been an inmate of Tewksbury for the past six years.

She was granted old age assistance at the rate of $35 a month on July 17, 1937. For a period of twenty-two days in January, 1938, she was in the

hospital with pneumonia.

There are seven children, five boys and two girls, all of whom are married. Two boys live in New Hampshire, where they are employed on the WPA. The other children live in neighboring communities, but with the exception of the youngest boy, who is separated from his wife, and the oldest girl, whose husband is fairly successful, the children claim inability to assist in any way.

Mrs. H. occupies a three-room duplex cottage, just outside the center of the city. It is situated in an alley, in which are located an automobile repair shop, a laundry, and several duplex cottage-type houses, all in more or less poor repair. The rent is $16 a month, and she provides her own heat by means of two stoves -- an oil range in the kitchen and a gas heater in the sitting room. She owns no real estate and her furniture was purchased in 1927, shortly after she left her husband. The place is cluttered and untidy, but fairly clean. The most conspicuous article of furniture in the kitchen is an immense electric refrigerator, which was acquired in 1935, while she was receiving public welfare, at a cost of $211, including interest charges. There remains at the present time a balance of $51, which she claims is being paid by her youngest daughter at the rate of $5.77 a month.

She carries four small John Hancock policies, totaling $200, on which the premiums amount to sixty cents a week.

Her budget is as follows: rent $16; food $13; insurance $2; heat and light $2; and miscellaneous expense $2. In this budget the first three items are fixed by the city of "A". State department policies demand that a sum of not more than fifty cents a week be allowed in the budget for insurance premiums. The $2 for heat and light allows for an average gas bill of $1 a month and 650 gallons of oil at eight cents a gallon for the year. This amount permits seventy gallons a month for seven months of the year, thirty-five gallons for two months, and thirty gallons a month for the three summer months.

No medical expense is included, because she visits the city physician once a month, and he has pre-

scribed no medication. During her illness in January of last year, medical expenses totaling $12.78 was paid by the city and approved for full reimbursement by the State. Her physical condition is very good, but she is a highly nervous and excitable individual.

The problem involved is an emotional one, due to personal inadequacy. From the time of the first visit in July, 1937, through September, 1938, fifteen visits were made by the local investigator -- an average of more than one a month -- and six by the State visitor. Two of these visits were routine and four in response to hysterical letters asking for help. The first one was occasioned by the receipt of a demand from a lawyer covering a grocery bill of $15.38 contracted at the corner grocery store in 1930. The owner, who never pressed for payment, had died in Florida and his executor was trying to settle the estate. Upon assuring Mrs. H. that no trustee action could be taken against her old age assistance grant, a lull of two months occurred, when a second letter arrived.

This time her youngest son, who had separated from his wife, had come to her small home seeking shelter. He was earning $35 a week, but under Court order was paying $15 a week for the support of two small children. The remaining $20 was being used to keep a small photography business going and to support himself. He had moved in on his mother just before Christmas and had become quite ill with influenza. She had nursed him until New Year's when she herself

became ill and was forced to go to bed. The local Board had not been informed of her illness, and when the State visitor arrived she found Mrs. H. with a high fever in a cold bedroom. The son was on a couch in the kitchen. The whole place was disordered and cold; there was no food in the elaborate refrigerator, and no fuel in the old container on the porch. The city physician was called at once, and immediately sent for an ambulance to transport her to the hospital. The son, when informed that his mother was to go to the hospital, got up and dressed, declaring that he could sleep in his shop. The local Bureau obtained a WPA housekeeper and had the place cleaned up. On her return from the hospital Mrs. H. was told that her son would not be permitted to live with her unless he paid his board. He offered to take care of her in return for his room, insisting that he could board himself and her by supplementing her food budget of $13 by a few more dollars. Because of her extremely frail physical condition, this arrangement was permitted until May, when his divorce became final and he announced that he was getting married again.

The third plea for help arrived in June, when Mrs. H. decided to go to New Hampshire for the summer. Her oldest son was running a farm and had invited her to stay with him, provided she could pay $5 a week board. It was explained to her that she could go for a period not exceeding

thirty days, with no suspension of aid, and that she would have to pay her own rent for the month she was absent. Charles called for her in a dilapidated car on Sunday, June 19th, and on the following Friday another letter arrived. Its incoherencies were finally deciphered. Charles' wife was mean to her and she was coming home. She would arrive in Lowell on Sunday afternoon, June 26th, by bus -- she had not enough money for her full fare -- and wanted to be met. Since the letter did not arrive until after the closing of the old age assistance office in "A", it was not until Saturday that the local visitor was contacted. She had already made plans for the week-end which could not be broken, so there was nothing left but for the State visitor to cancel her own plans and drive to Lowell on Sunday afternoon.

Mrs. H. was in a highly emotional state. She railed and ranted loudly against her daughter-in-law and was fast becoming hysterical. The visitor finally stopped the car and started to talk to her. She carefully reviewed Mrs. H.'s history from her marriage to the present, telling her exactly what she felt was wrong. The visitor minced no words and refused to listen to Mrs. H.'s interruptions. She enlarged on the fact that from a capable young German immigrant she had become a whining and dependent old lady. She showed Mrs. H. how her seven children had been affected by her gradual emotional deterioration, as well as by their

father's unstable characteristics, and endeavored to impress on her that salvation lay in her own two capable hands that could perform intricate fancy work or manufacture sensible household furnishings with equal skill. She offered to find Mrs. H. a customer for a beautiful bedspread she had crocheted and suggested other ways of earning small sums of money. Before long Mrs. H. was enlarging on the possibilities for augmenting her income. The remainder of the ride was delightful!

Monday morning the visitor conferred with the local Bureau and as a result of this conference Mrs. H. was put in touch with the Woman's Exchange. On October 15, 1938, her assistance was reduced to $20 a month, as she had earned an average of $20 a month, over and above the cost of materials used, during August and September, with the possibility of an increased income during the pre-Christmas period.

On the last routine visit made by the State visitor, Mrs. H. thanked her for all she had done.

Case 2. A man, W.M., 80 years of age, born in Boston and married when about 21 to a cousin, also born in Boston. Widowed since 1902.

He has been aided since December 10, 1934. His original grant was $4 a week, which was increased to $6 a week in February, 1935, and to $30 a month in October, 1936.

When first aided he was living with a married daughter in a modern six-room apartment in a nice

> section of the city. The daughter's husband was employed in a local printing office. She had no children. Mr. M. had been turning over the $4 grant to cover his board, and when his allotment was raised, he increased this to $5 a week, retaining $1 to cover his personal needs. This really went to pay bus fare once a week to a nearby State institution for the insane, where another daughter was a patient. His third child, a son, who had five minor children to support, was receiving soldier's relief.
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> In September, 1936, the daughter's husband was laid off, so Mr. M.'s aid was increased to $30 a month to cover a weekly rate of $6 a week for his board. In November, shortly before Thanksgiving, the old man suffered a shock, and it was while he was ill in bed that the writer first contacted him. The daughter, Mrs. B., was a cardiac patient herself and found it impossible to give her father adequate care. Accordingly, after consulting with the local Bureau, the State worker authorized Mr. M.'s removal to a nursing home, at a flat rate of $70 a month. No medical expense is allowed in addition to this amount.

There has been no attempt made, by either the local or State visitor, to do more than see that Mr. M. receives excellent care. He is rapidly becoming senile, and inquires continually for his mentally sick daughter. The visitors make routine visits and always assure him of her well-being. He has no assets whatsoever, and his funeral expense will be assumed proportionately by the State and local Bureau. The problem here is entirely medical, the solution being the palliative care provided.

Case 3. A man, J.R., aged 75, born in Ireland and naturalized fifty years ago in Boston. Widowed since 1933, just prior to his application for old age assistance in February, 1934.

Of his six children, two girls and two boys are married. The two unmarried children made their home with their parents before the mother's death, and since then all three have moved in with Mr. R.'s widowed sister. The other daughter was a patient at a tuberculosis sanatorium. Her two children were being cared for by their father's people. The two married sons were earning small salaries; one was a widower with three unmarried, unemployed daughters, the other had only himself and his wife to support, but she was a chronic invalid. The other married daughter, a widow, was living in Ohio with her married son.

The youngest boy had been unemployed since the beginning of the depression, and his aunt had supported him. The single daughter has a good position with an insurance company in Boston and provides all incidentals for her father. His grant of $22 a month, which he has received since he first applied, is turned over to his sister for board.

Mr. R. is practically blind, suffering from glaucoma, and is very deaf. He has received no medical care, however, nor is any indicated.

At the time of application for aid, he had $287.04 in a local savings bank. In June of 1937 he loaned his sister $150, receiving in exchange a notarized statement that she would care for his funeral expenses.

The only case work done was in October, 1936, when arrangements were made for an examination at the Massachusetts Eye and Ear Infirmary in order to determine if anything could be done to save his sight. A negative report was received. Since then he has received his allotment regularly and on routine revisits by the State visitor has declared that he is happy and contented. Results in this case have been negative, although palliative care has been provided.

Case 4. A man, T.E.M., aged 66, born in New Brunswick and naturalized in Boston in 1902. Married in 1895 and separated (not legally) since 1937. His wife is now living with a daughter and is receiving soldier's relief.

He has five children, three of whom are being supported at government expense -- one in a U. S. Veteran's Home, one under soldier's relief, and one on the WPA. Another son is in the U. S. Navy and the youngest boy is employed as a temporary letter carrier.

He has no assets with the exception of a $400 John Hancock policy, the weekly premium of eighty cents being carried by the letter carrier.

At the time he applied in January, 1938, he was boarding at the home of a Mr. D. The living conditions were very poor. Mr. D. is an Italian with seven small children, and at the time his wife was again pregnant. Mr. M. was paying $4 a week for board, his youngest son supplying this as well as caring for all his incidental needs. A grant of $4 a week was given.

At the time of Mrs. D.'s confinement, the local Board was forced to find new quarters for him, and when his son suggested a Mrs. F., the Board agreed against its better judgment. Mrs. F. had been known to a private agency and had a police record for drunkenness and neglect of her children. However, Mr. M.'s physical condition was such that a suitable home was difficult to find. Quite lame with arthritis, he had a partial paralysis of the bowels which necessitated a great deal of care. Nevertheless he was not disabled enough to need care in a licensed nursing home. His aid was increased to $30 a month.

In September of 1938 the son's temporary appointment was certified, and the local Board decided that he could assume more of his father's care. After repeated conferences with the son, the aid was decreased to $20 a month in November.

The son immediately transferred his father to another private home, where the board was $10 a week, and appealed for an increase. As a result, the State Board of Appeal increased the grant to

> $30 a month with medical expense in addition. Since Mr. M.'s physical condition had consistently become worse, the local Board would probably have granted this increase without the decision of the Appeal Board.

This case is primarily a medical problem, the economic factor which entered in being due to the son's refusal to accept a fair share of his father's expenses. His attitude has been one of belligerance, repeatedly daring both the State visitor and the local Bureau to refuse the minimum grant of $30 a month. On a routine revisit the State visitor recommended transfer to a nursing home at $65 a month, but the local Board refused on the grounds that the son was able to supply the difference between the $30 allowed and the $65 needed. In spite of the frequent attempts of the State visitor, the Board refused to change its attitude. The writer has no doubt at all that had the son been more cooperative at the time of the decrease, when the case needed no medical care, the Board would have cheerfully assumed the whole cost of care when the change to a licensed home was suggested.

Here case work was indicated to educate the son, rather than the recipient, as to his responsibilities. Case work was attempted, to be sure, but when opposition was encountered, the local Board did not persist. This is definitely an example of lack of case work. Incidentally, the local Board is at fault in maintaining its vindictive attitude toward the son.

Case 5. A married couple, Mr. and Mrs. D.A. He is 67 and she is 68 years of age, both born in Scotland, and citizenship gained through his naturalization in Boston in 1910.

They emigrated to America shortly after their marriage, making their home in the city of "A". They live in a small six-room cottage, attractively situated on a hill top in a rather sparsely populated section of the city, about three miles from the center. The property is assessed for $4800 ($100 of which is on an adjoining vacant lot), with a mortgage of $850, and is listed jointly. Since assistance was granted on April 11, 1938, when the equity allowed was $2,000, a mortgage bond of $950 was signed by the applicants.

Mrs. A. carries two life insurance policies, one for $478, which is a paid up policy, and another for $150, on which the premium is fifteen cents a week. Mr. A. carries a $1000 John Hancock policy on which the premium is $43.52 a year. The difference between the $26 allowed in the yearly budget and the total amount is paid by a married daughter.

There are two children, a son who is a practicing attorney in a nearby city, who claims inability to assist because of an invalid wife, and a daughter who is dependent upon her husband for her own support.

Physically, Mrs. A. is in excellent health, having had no medical attention since childbirth. Mr. A.'s hands are paralyzed as a result of two severe shocks, and on the first visit medical attention was authorized. The diagnosis, however, indicated that little could be done. Mrs. A. expressed her desire to care for her husband and scoffed at the idea of being unable to do so.

The State visitor worked out the following budget: Property charges $24.15 (based on taxes of $111.54, water $9, interest and principal charges $161.04, and fire insurance $8.20); food $25; heat $7 (six tons of coal at $15 a ton); gas and electricity $5; insurance $2.75; miscellaneous and cothing $10. This totaled approximately $74 a month. The daughter and her husband, Mr. and Mrs. G., agreed to contribute $25 a month to

cover miscellaneous expenditures and to supplement the allotted grant of $50 a month.

This was apparently a simple case of economic distress, due to the husband's physical disability and consequent loss of earning power. However, at about Christmas time, on a routine revisit, Mr. A. complained that his daughter, Mrs. G., had been irregular in making her contribution. Mrs. A. attempted to minimize the incident, but finally admitted that since Mr. G. had been put on a part-time employment basis it had been impossible for the G.'s to contribute the $25 a month. A visit to the daughter's home substantiated this, but information was given that the son, R.A., was in a position to help more than he had admitted. A visit to his home proved the truth of this; the wife, not knowing the visitor's interest, spoke at length of her excellent health and freedom from doctor's visits for the past three years. She also enthusiastically discussed the fact that her two children had been placed in private schools because her husband was doing so well in his practice, mentioning a well-publicized case for which he had acted as attorney. The visitor conferred with the local Board, and it was arranged for the State and local workers to see him together. A visit was made to his office and it was explained to him that filial responsibility had not been removed from the law, and he was requested to cooperate with his brother-in-law in caring for his parents. After several interviews,

he finally agreed to assume half of the amount needed to balance the budget.

The local Bureau has been watching for any lapses, and as a matter of fact, he has been contributing from $15 to $20 every month, as the burden has become increasingly difficult for his sister's husband to carry. Here case work with the son accomplished the desired results, for not only was financial aid given, but his assumption of responsibility had an excellent effect upon his father's morale. He is very proud of "what my son is doing"!

Case 6. A man, W.K., aged 78, born, married, and widowed in the city of "A". He was granted old age assistance in May, 1935, at $5 a week.

He made his home in the old homestead in which he was born, until the winter of 1937, when he was injured while chopping wood. A block flew up and hit him on the head, causing a slight concussion. Luckily he was talking to a neighbor at the time, who called a doctor. He was placed in the hospital on November 13th and remained there until November 24th. The local Board was not notified of his hospitalization, and on his discharge he was removed to his son's home. A hospital bill of $44 was paid by this son, for which he asked to be reimbursed when the State visitor made a regular routine visit. This, of course, was impossible. However, an increase to $30 a month was arranged, more adequately to cover his nursing care.

On his return to his own home in the summer this amount was continued, on the basis that medical expense would have to be met, which had not been necessary heretofore. The revised budget called for: Property $2 (the assessed valuation being $800, with a $200 mortgage, tax free, interest $10, insurance $5, and water rates $9 -- a total

> of $24 a year); food $13; fuel $3 (three tons of coke at $12 a ton); miscellaneous expense and clothing $8; and medicine $4.
>
> There were no other assets.
>
> His only son was unable to assist, being married with two children, and employed on the WPA.

In November of 1938 the old man was persuaded to return to his son's home for the worst winter months, as the heating facilities were inadequate and he was becoming very feeble. Since the accident the previous winter, too, he was becoming increasingly senile, and was not to be trusted around fires. In January the wisdom of this removal to his son's home became evident, for he suffered a severe shock. Hospitalization was indicated, and he remained there for three days until the authorities were convinced that he would never return to the full use of his faculties. He has since been transferred to a nursing home where he is being cared for at the rate of $65 a month. He is slipping rapidly, and his death is only a matter of a few weeks at the most.

When the term "persuading" is employed, it is used euphemistically. For a period of three weeks both the local and State visitors used every argument possible, but a senile old man can be very recalcitrant, to say the least. Success was made possible when all seemed lost. An old crony happened to call during one of these interviews. He was on old age assistance, too, and lived quite near Mr.

K.'s son's home. Knowing this, the State visitor began to sympathize with him, praising him for his loyalty to Mr. K., especially when his own rheumatism was so bad. She declared that Mr. K. didn't deserve his friendship because he could easily move nearer to him, if he only wanted to do so. Old Mr. O'D., with the easily aroused emotions of the Celt, immediately rose to the bait. Mr. K., in order to preserve the friendship of half a century, had to express his willingness to make the change. The visitor, realizing that victory was hers, immediately offered Mr. O'D. a ride home before Mr. K. could change his mind. Unorthodox? Perhaps -- but efficacious.

The original problem here was economic, with a reduced income because of the old man's loss of employment, coupled with a complete absence of any savings upon which to fall back. Then a medical factor entered -- the acute illness at the time of the accident and the gradual onset of a chronic condition -- and the problem became further complicated by a housing situation, the lack of a companion who would provide suitable care.

Definite case work resulted in progressive changes in environment as the degree of palliative care required became greater.

Case 7. Mrs. M.L., a widow, aged 70, born in England and citizenship gained through marriage to a natural-

ized citizen.

She has three children: a married daughter with whom she makes her home, a second daughter who is divorced and employed as a working housekeeper where she can care for her two small children, and a son, serving a five-year sentence at the Charlestown State Prison. In fifteen months he will be eligible for parole, the State visitor was proudly informed.

Mrs. L. has no assets with the exception of five small Metropolitan policies, totaling $857, the weekly premiums of $1.35 being paid by her two daughters.

Mrs. L. is very deaf. She has had several slight shocks as a result of high blood pressure, and also suffers from a severe form of kidney disease.

Living conditions are very satisfactory, although rather crowded, as her daughter augments the WPA salary of her husband by boarding another old age recipient at $7 a week.

Mrs. L. turns over $10 of each of her semi-monthly checks of $15 to her daughter, retaining $5 to cover her clothing and miscellaneous expenses. This item also covers the various patent medicines which she comsumes. She refuses to consult the city physician.

The case is primarily one of economic distress, based on loss of her natural supporter -- her husband -- and no savings account. Secondarily, there is a medical problem and it is in this connection that case work is needed, beyond the palliative care provided. Because of the daughter's obvious devotion to the old woman, this case has been continued with no changes. Routine revisits are made, but beyond a real feeling of friendliness which exists, no case work has been done.

Case 8. A man, W.H.M., aged 74, living with his wife in a four-room apartment in an excellent section of the city. The rent is $30 a month, which includes heat, electricity, and telephone privileges.

His wife is too young to receive old age assistance, but has been aided under welfare to the extent of $25 a month. This, coupled with a grant of $30, plus $10 a month which he earns, has sufficed to cover their expenses, based on the following budget: Rent $30; food $25; gas $3; medicine $2; miscellaneous expenses $5. The $2 medical expense covers liver injections for Mrs. M. who is anemic.

There are no children, and no assets of any kind.

Mr. M. is a remarkably active and mentally alert old man, looking and acting like a man of sixty. He is a graduate of a middle western University, and was formerly employed as a clerk in a law office. About fifteen years ago he went into business for himself, collecting bad accounts on commission. For ten years he was very successful, but after the onset of the depression he found himself unable to cover expenses. He continued to rent desk room, although he became further and further in arrears. Finally, he made an arrangement whereby he acted as office boy, answering the telephone and receiving callers in the absence of the lawyer, in place of rent. He has managed to average $10 a month on collections.

While every case is judged on its own merits, and it seemed advantageous -- from a psychological standpoint -- to keep him employed, so many complaints were received from other recipients that it was felt his employment must be terminated.

This decision was strengthened by a visit from his wife to the central office, at which time she complained that the daily trips to Boston were sapping his strength and his earnings were practically nil, since train fare and lunches

had to be deducted from his commission. Accordingly, she was instructed to request him to remain at home the following Saturday morning. In the meantime, the State visitor conferred with the local superintendent and arrived at a tentative decision. The January 15th payment, which was ready for release, was ordered held pending a definite "show-down" with Mr. M.

When the State visitor arrived Mr. M. was pacing up and down like a caged lion. "Am I a prisoner?" he demanded angrily. The visitor denied any intention of being a jailer. She explained that if this were so, Mr. M.'s employment would have been frowned upon at the time his application was accepted. He persisted in acting the rôle of a martyr.

The state of his failing health was touched upon. At first he refused to acknowledge that his heart condition had become aggravated, but finally admitted that he was taking a later train to Boston every day, and an earlier one back to "A". Further questioning elicited the fact that his monthly income from earnings was much smaller. "How much smaller?" Here the situation became clarified when Mrs. M. produced a detailed account of household expenses. For the past four months the net income had been: September $7.43; October $4.28; November $3.25; and December $4.32. During the same months, his medical expenses had jumped to a total of $14.45. As a result they were

behind with one month's rent and two months' gas bills. The visitor appealed to Mr. M.'s business experience and finally convinced him that the proposition was a losing one. The recommendation on the report of this visit is: "Increase to $40 a month, on condition that his promise to discontinue his trips to Boston is kept. Release January check."

On February 1st his assistance was increased to $40 a month, and the local visitor undertook to follow up the case with a view to releasing the tension which existed, and to build up this couple's morale. Meanwhile the State visitor maintained her advantage and sought to eradicate the persecution complex which was complicating the situation. On a routine revisit in June Mrs. M. exhibited a perfectly balanced household account book, Mr. M. had gained weight and was busily engaged in writing his memoirs, and the visitor was hailed as the "dea ex machina" who had ironed out a strained situation involving the recipient, the local Bureau, and public opinion in general.

An intricate combination of circumstances, comprising economic, medical, and emotional factors, was successfully treated by the combined techniques of two skilled workers acting in perfect accord.

Case 9. A woman, Miss I.B., aged 70, born in East Boston, and living alone in a house assessed for $1700, with no mortgage. Living conditions very poor.

She carries no insurance on her life, but has a bank account of approximately $100, and owns one share of railroad stock, which had a par value of $200, although the present market value is less than $35.

Physically in poor health, she has chronic gall stones and a cardiac condition.

She manages beautifully on her allowance of $30 a month, the budget worked out by the visitor calling for: Property charges $8.15 (covering taxes of $54.50, fire insurance $11.25, and water rates of $9 on the property which she owns in "A" and taxes of $14.82 and insurance of $8.40 on a camp property which she owns on an island near Portland, Maine); food $13; fuel $4.25; and miscellaneous expenses and clothing $4.50.

It has been her custom for many years to spend her summers at the camp, and this arrangement continued after she was granted old age assistance in January of 1937. When she leaves for Maine her assistance is continued for one month, which takes care of her food budget for the two and one half months she is at the camp.

On the first visit, the State visitor found her nervous and suspicious. She felt she was being persecuted, resented the interview, and cried bitterly because she was receiving charity. The visitor explained the receipt of old age assistance in this way: "You never minded receiving the dividend on your railroad stock, did you, Miss B.?" The client quickly retorted that she had invested her money in that stock and expected to receive returns, and the visitor continued, "Well, when your parents built this house didn't they invest in the city of "A" and in the state of Massachusetts? And after their death didn't you inherit this investment along with their other bequests to

you? Well, then, now that you have reached sixty-five and over, your investment has matured and you are receiving dividend checks twice a month." Delighted to find so logical an explanation, Miss B. became rather emotional. The visitor continued to discuss the "investment" in a matter of fact manner, and Miss B. controlled herself.

On three subsequent routine revisits Miss B. has been friendly and cooperative. The initial problem was one of poor housing, due to lack of income, with its concomitant emotional distress. Once the emotional situation was cleared up, the State visitor was able to make suggestions relative to keeping the one room of the rambling old house in which she lived most of the time in a more tidy condition, and prevailed upon her to set aside a second room for her sleeping quarters.

She has had to be restrained from showering exquisite samples of needle- and fancy-work on the visitor. In January she begins to make Christmas presents for her many friends, and her "treasure chest" of completed articles is remarkable. She scorns the suggestion that she augment her income by the sale of her handiwork. The materials are given to her by her friends, and so she must return the compliment by presenting finished work. She is deeply appreciative of the friendship of both the State and local visitors and no longer considers her "pension" a disgrace.

The local visitor does a great deal of constructive

case work in maintaining the recipient's morale by taking her to church affairs quite frequently as her guest.

Case 10. A man, L.L., aged 77, born in Ireland and naturalized in 1894. Single, living in a boarding house in the center of the city.

In August of 1936 he was transferred from temporary aid to old age assistance at the rate of $7 a week, the same rate he had been receiving. In January of the following year he was sent to the hospital with the diagnosis of hypertrophied prostate, where he remained until March, when he was transferred to the Infirmary in a neighboring city for the period of convalescence. On the first of April he was reinstated under old age assistance at the same rate he was originally granted, $30 a month.

In the same boarding house there are some eight or ten men, six of whom are receiving aid, either temporary or old age assistance. Mrs. A., the landlady, charges $30 a month for board and room. Conditions are very good. Most of the boarders have been with Mrs. A. for many years and consider the place "home". As the other old age recipients are receiving $35 a month, which allows them $5 a month for incidental expenses, a recommendation was made to increase Mr. L.'s allotment to the same amount. This was done in January, 1937.

No case work has been done. The local Bureau insists that none is indicated. Routine revisits are made, and since conditions are apparently satisfactory, no changes have been recommended. Visitors are no novelty to Mr. L. for he has been on welfare for the past twenty years. He is a gentle old man, and while he had a police record for drunkenness in his earlier years, no complaints have been received for more than twelve years.

The problem here is purely economic, due to loss of employment and no savings. He has no relatives to aid in his support. The unemployment is, of course, due to chronic alcoholism with its accompanying medical problems.

2. In a small town

In town "B", the same procedure has been followed. Of the one hundred cases chosen, 72 per cent showed economic distress as the primary reason for seeking aid; 10 per cent showed ill health as the chief cause; emotional problems dominated 8 per cent; and the remaining 10 per cent are due to poor housing conditions. Of the eight cases based on emotional difficulties, personal inadequacy is found in one case, "in-law" difficulties in three, and an uncooperative attitude on the part of the children in the remaining four.

As in the city of "A", when budgets are computed certain items are more or less standardized, but since "B" has no town physician an allowance is made for medical expense in every case where such care is indicated.

"B" is a community covering quite a large geographical area. It consists of four separate and distinct settlements: the "Center" near the Town Hall, fire station, library, stores, etc.; the "Hills", a sparsely settled and comparatively new development, where paving is at a minimum and traveling conditions poor; the "Dale", a prosperous section well served by schools, churches, stores, etc.; and

"East B", a run-to-seed section, around the railroad depot, which was once the most important industrial section of the town.

There is no hospital in the town, and no real nursing homes. The town utilizes institutions in "A" and in "C", a nearby industrial center, for cases needing hospitalization. Of the ten cases where the chief problem is medical, one is in the hospital in "C", and the other nine are being cared for in their own homes, or in the homes of friends and relatives.

This fact, that no large grants of $65 a month are given for care in licensed homes, probably accounts in large measure for the comparatively small average grant -- $23.36 a month -- in contrast to the average grant of $27.52 a month in "A".

Again, the writer has chosen ten cases at random, out of the original one hundred, which will be analyzed later in this report and compared with the ten cases selected in the city of "A".

Case 11. A married couple, Mr. and Mrs. A.E., aged 75 and 70 respectively, both born in Sweden. Citizenship gained through his naturalization in 1890 in Delaware.

In 1910 they moved to "B" where he went into the construction business. At the time of the depression he lost all the houses he was building on speculation, and when he applied for assistance in 1936 they were living in the only house he still owned, an attractive seven-room bungalow

> in a new development.
>
> The property was assessed jointly for $3500, with two mortgages totaling $4100 -- one for $3500 and a second one for $600.
>
> Physically active, worry had induced a hypertension which necessitated the care of a physician.
>
> In order to get assistance, it was necessary to make arrangements with the bank whereby payments on the principal were waived and a payment of $30 a month substituted, part of which was used to cover the carrying charges which the bank had assumed.
>
> Neither of their two children were able to assist financially, but his wife went out to work by the day, averaging about $10 a week. He was a master carpenter and managed to earn from $8 to $15 a month doing odd jobs.
>
> Their budget was: property $30; food $20; fuel $5; electricity $4; medical care $5 (which included a visit to the doctor every six weeks by Mrs. E. for a severe pelvic displacement). Accordingly, a grant of $16 a month was made to help balance the budget. In January, 1937, Mrs. E. had an attack of pyelitis, and, unable to continue her work, was allotted $25 a month. In the meantime, he had obtained more steady employment, averaging $25 a month. In April, his earnings had increased to $12 a week, so his aid was discontinued.

On routine revisits to Mrs. E. a growing uneasiness was noted. The bank was threatening to foreclose, and all her thrifty Swedish instincts were outraged. The visitor advised Mrs. E. to persuade her husband to submit to the inevitable and to salvage what happiness they could. The advantages of an inexpensive rented home were stressed, with freedom from worry and a chance to live at a more peaceful tempo. Mrs. E. begged to visitor to explain the situation to her husband, and several calls were made be-

fore Mr. E. agreed to get out from under. He kept procrastinating, however, and in November he fell from a roof he was shingling and was seriously shaken up. when he was unable to meet his obligations during the ensuing months the bank foreclosed in March, and his case was reopened. On the present grant of $50 a month they are pleasantly situated in a four-room apartment in a nice section of the town. The rent of $22 a month includes electricity and heat. His high blood pressure has improved to such an extent that no medication is necessary. His wife's health is better, too, and the medical expense is reduced to monthly visits to her doctor.

His resentment at being forced to give up his property has evaporated to such an extent that he greets the State worker cheerily and shows off his small garden in the back yard with childish pride. "Ja!" he exclaims, "now I got time to grow pooty flowers! Here is nice bunch of sweet peas for sweet young lady."

"Axel, you fool," Mrs. E. interrupts, "keep quiet. Try some coffee cake, miss." And the visitor sits in the spotless kitchen and drinks strong Swedish coffee while Mr. and Mrs. E. chatter happily about a new and enjoyable leisure.

The problem was primarily economic, due to loss of investments and savings, and complicated by worry, which in turn fostered a medical problem. Housing was involved

to a certain extent -- not poor housing, but housing too expensive for their limited income. Case work was done by the State worker, the building of morale by release of tension and a change of environment. Most of the work done, however, could have been accomplished by a trained local visitor.

Case 12. A widower, J.I., aged 65, born in Ireland and naturalized in 1901.

He lived in the west for many years, where he was widowed twice before coming to Massachusetts in 1915, where he was married for the third time. His third wife died in 1931 in a neighboring city, where he had acquired a legal settlement, and in 1935 he moved to the town of "B" to live with a married daughter, since widowed.

When the daughter's husband died in 1937, he applied for old age assistance in order to pay for his board.

He carries a $340 John Hancock policy, costing $38.50 a year. This has been paid by a second daughter, to whom it is assigned. This daughter is unable to assist otherwise, as her husband earns about $23 a week, on which a family of six must be supported.

Mr. I. turns his entire grant of $16 a month over to his daughter, and all concerned are apparently satisfied with this arrangement.

This is a clear problem of economic insufficiency, caused by old age and consequent lack of employment. No acute medical problem is involved, although the client suffers from the usual ills of senescence.

If Mr. L., his son-in-law, had not died no application for old age assistance would have been made in all probabil-

ity.

The function of old age assistance -- to supplement the resources of an individual -- was explained to Mrs. L. She agreed that the presence of her father did not increase her household expenses, except in the item of food, and herself suggested the rate of $4 a week to cover his share.

No case work was indicated, and none has been attempted.

Case 13. A married man, H.W., aged 66, born in Sweden and naturalized in Boston in 1910. He has resided with his wife in the town of "B" for many years, in property owned jointly with her. The assessed valuation is $2175, with a mortgage of $900. Property charges amount to $10.43 a month.

The house is a well built, seven-room cottage on the outskirts of the town, and the household includes the recipient, his wife, and two sons -- aged 16 and 18 -- neither of whom are employed. The two older children, Alice and Caroline, are married and living in Chicago. His wife is employed in a shoe shop, earning from $12 to $14 a week.

At the time of application, a snag appeared in the matter of insurance, which at that time was limited to $500. He was a member of two fraternal orders, in one of which he was insured for $800, and in the other there was a death benefit of $200. In addition, he carried a John Hancock policy for $114. The following month, however, while his application was still in abeyance awaiting his birth certificate from Sweden, the State policies regarding insurance were changed, making him eligible.

Mr. W. is badly crippled with rheumatism, although not under the doctor's care. Because of this a

grant of $24 a month was made. This covered the items of fuel, electricity, property charges and insurance. His wife's earnings were sufficient, it was believed, to cover food and incidentals for a family of four.

Again, this case is one of economic distress, the contributory causes being loss of employment due to old age, and lack of savings. When the boys obtain employment a deduction in his assistance will be made, depending on the salaries they earn and the amount they pay for board. If his wife should lose her job, however, his allotment would undoubtedly be increased to the minimum of $30 a month.

This case is typical of the average case applying for old age assistance in Massachusetts -- an insufficient family income. No case work is indicated and none has been attempted, other than to work out a satisfactory budget for the recipient and his wife.

Case 14. A single woman, Miss J.B., aged 67, born in Nova Scotia, and naturalized in Boston a month prior to applying for old age assistance.

She has a single room in a private family, for which she pays $3 a week with kitchen privileges. She eats her main meal in a nearby restaurant, preparing a simple breakfast and luncheon at home. Her budget of $30 a month allows $13 for her room; $15 for her food (fifty cents a day -- thirty-five cents for her main meal, five cents for toast and coffee in the morning and ten cents for fruit, bread and butter and tea at night); and $2 for miscellaneous expenses. Her older sister is married to a prosperous business man in "B" and furnishes all her clothing.

Because of clashing personalities, it is impracticable

for Miss B. to make her home with her sister and brother-in-law. This case is one of absolute personal inadequacy. Miss B. is a timid, mouselike creature who is reduced to tears at the least hint of censure. Discreet questioning unearthed the fact that as a young girl Miss B. was very much in love with the man her sister married. She didn't "play her cards right", and her sister won the prize. No feeling of bitterness exists, however. It just wasn't to be, she reasoned, and prepared herself to teach school. A succession of positions convinced her that she was a failure. Curiously enough, she always made a comfortable living as a kindergartner until 1920, when a functional melancholia developed. Her brother-in-law paid her expenses in a sanatorium for five years until she was discharged. She lived on her savings until 1929, at which time her bank account was reduced to $168. Suddenly, out of a clear sky, an uncle died leaving his estate to the two sisters. After all charges were paid her share amounted to about $4,500. In 1937, when she applied for assistance, she showed a bank balance of less than $100. An itemized account of expenditures for the period from January, 1930, to December, 1937, showed $4,160 for board (at $10 a week); $147 for clothing; $63 for medicines; and $254 for hair work (including two wigs!).

It is difficult to explain Miss B.'s attitude. In spite of exceptionally good fortune she retains an emotion-

al immaturity that irritates everyone with whom she comes in contact.

The basic emotional problem has been intensified by her inability to earn her own living. The whole situation is predicated on an unhappy love affair: the natural supporter which her upbringing had led her to expect never materialized, and as a result her whole life was affected. As she phrases it, "Life has licked me." The State visitor has tried to change her psychology to no avail. This case calls for a high degree of skill, but the State worker cannot devote much time on this case. The local visitor is a man who antagonizes Miss B. although he is honestly trying to be sympathetic and helpful. Since her material needs are supplied and she is as contented as is possible under the circumstances, the case has been continued with no changes, and no case work has been done.

Case 15. A widow, Mrs. M.F., aged 72, born in the town of "B" where she has lived all her life. Since her husband's death in 1926 she has made her home with her only daughter, whose husband is an executive in a large public utility company in a nearby city.

Mrs. F. is bedridden as a result of a chronic heart condition. She is under the doctor's care continually, her medical expense totaling about $10 a month. She has no assets other than a $250 paid up insurance policy.

Although her son-in-law is very good to her, and charges her no board, she insists on paying for her own medical expenses. Mentally active, she has a keen appreciation of the old age assistance

law, and declares that the town of "B" is responsible for her doctor's bills. She proudly indorses each $5 check she receives for her daughter to cash and pays Dr. S. for every visit.

The only problem is a medical one in this case, and if none existed Mrs. F. would ask for no assistance.

No case work has been done, and any attempt would probably be resented by both the recipient and her family. "Need" might be questioned here, but since her son-in-law is not legally responsible, and is doing a great deal for her already, it was felt by the local Board, and supported by the State, that the $10 a month grant was justified.

Case 16. A man, A.B., aged 72, born in Boston and living in the town of "B" since his sixth birthday. His wife also applied for old age assistance but her application was rejected on the grounds that her children should support her.

Mr. B. was married late in life to a widow with ten grown up children, the youngest of whom lives at home. This boy, Warren, is employed on the WPA and pays board of $10 a week. The other nine stepchildren are all married and are either out of the State, unemployed, or on relief.

Mr. B. has hardening of the arteries and has had two slight shocks. He is under the doctor's care and averages about one visit a month.

The rent of the five-room house in which the three of them live is $3 a week. It is in a poor section of the town and lacks modern improvements. Their budget calls for $65 a month: Rent $13; food $35; fuel $5.50; gas and electricity $3; medical expense $3.50; and incidentals $5. This is balanced by an income of $65 -- $25 old age assistance and $40 for Warren's board.

Here the problem is fundamentally economic, based on

loss of employment and lack of savings, with a secondary phase due to the ailments of old age.

The local Board is of the opinion that case work is not indicated, and consequently none has been attempted.

Case 17. A single man, T.M., aged 70, his sister, J.M., aged 76, and a niece, Mrs. G.M., all born in the town of "B", living in property owned by Mrs. A.H., the sister of T.M. and J.M. and the mother of Mrs. G.M.

The four of them share expenses. His grant of $20 a month had been turned over to cover his board until September, 1938, when he started to retain $5 a month to cover needed dental work. He expects to finish paying for complete extractions and two dentures by August of this year, when he will again pay the $20 to his sister.

J.M., his sister, is a frail little old woman with a severe spinal curvature. A surgical corset costs $15 and lasts about a year. The $20 she receives is used to cover the item of board, but when a new corset is needed she pays only $5 for that month.

Mrs. G.M. also receives $20 a month, but as she acts as housekeeper she pays only $10 a month for her board. The other $10 is used to cover her clothing and miscellaneous expenses.

The $50 contributed by the three recipients covers the items of food, fuel, and electricity. Mrs. H. provides clothing for her brother and sister and balances the budget on those months when medical expenses have to be met by J.M. and T.M.

Mrs. G.M., the youngest member of the household, is a large active woman, a widow, who manages the household with economy and skill. The house is spotless and there is apparently no shortage of fuel or food.

Mrs. H., her mother, is bedridden. She is a querulous,

demanding old woman of 85, who lets no one forget that she is mistress of the house. She rules the other three with a rod of iron, and expects unquestioning obedience.

The property, a compact eight-room cottage home, is assessed for $1800 and taxes have been abated. There is no mortgage. Her husband, a railroad employee, was killed in the line of duty, and the pension she receives -- the amount of which she refuses to divulge -- amply cares for her own needs.

The local Bureau has been suspicious of the question of "need" in this case, but nothing tangible can be proved. The submissive attitude of J.M. and T.M. is at variance with the generous gesture of Mrs. H. in providing extras. The State visitor suggested that the local Board trace the various real estate transactions in an attempt to throw some light on the matter. It appears that the property had been built by the parents of J.M. and T.M. and the brother and his two sisters had inherited. Mrs. H. was at that time living in another home with her husband and daughter. After her husband was killed, she continued to live with daughter until after the latter's marriage when she suddenly sold her home and moved back to the old homestead. In 1900 J.M. and T.M. transferred their interest "for a consideration" to Mrs. H. All attempts to discover what this "consideration" was have failed. Possibly the reason for the transfer was to enable Mrs. H. to apply for tax abate-

ment as a widow. That subterfuge and evasions exist is evident, but legally eligibility cannot be questioned.

A seemingly cooperative attitude hides a stone wall of reticences. No case work has been done by either the local or the State visitors. Is case work indicated? The problem is apparently economic, the causes being loss of employment, loss of natural supporters, and lack of savings. That insufficient investigation colors the picture cannot be denied, but lack of case work accomplished is not the fault of the local Bureau entirely. They have certainly tried.

Case 18. A widow, Mrs. M.S., aged 75, born in Boston and a resident of the town of "B" since her marriage in 1881.

She has two children, married daughters, who live in adjoining cities. Both are dependent on their husbands who earn steady salaries. One is the manager of a grocery store, the other a salesman. Each daughter has three minor children.

A life insurance of $150 on Mrs. S.'s life is carried by one of the daughters.

At the time of application in June, 1937, Mrs. S. was living along in a five-room cottage which she owns. It is assessed for $775, with no mortgage. Taxes are abated, and carrying charges -- covering water and fire insurance -- amount to $1 a month.

Mrs. S. claimed to have had "congestion of the lungs" when she was a girl and had been in a hospital for about six years. In addition to this, which the visitor assumed was an arrested tuberculosis (and which was afterwards confirmed by her physician), Mrs. S.'s right eye was covered by a cataract.

A budget of $24 a month covered the following items: Property $1; food $15; fuel $4; miscellaneous expenses, clothing, and medicine $4. The case was opened on June 30, 1938.

On the day the first visit was made, a blistering day in July, the visitor found the recipient in an unbelievably dirty kitchen, which was also being used as a sleeping and living room. The hot, humid atmosphere was sickening. An unappetizing pot of food was simmering on a smelly oil burner, while the odor of unwashed humanity was so strong that the visitor requested that the interview be held on the rickety porch. Mrs. S. proceeded to wrap herself in several garments before venturing out, explaining about the lung condition.

The old woman flatly refused to live with either of her daughters. "This is my home and here I stay" was her ultimatum. The State visitor conferred with the local Board and it was agreed that she should remain in her own home for the summer months, but that winter occupancy was out of the question.

In October the local visitor informed the State department that Mrs. S. had been moved to her younger daughter's home and that payments were being made to her direct. The story behind this move is interesting. Mrs. S. had refused to listen to the combined persuasion of the local visitor, her daughter, her physician, and the parish priest. Apparently she was adamant. Finally, the local visitor de-

clared that he would get in touch with the State department and ask them to stop payment on the grounds that she was not deserving because of her uncooperative attitude. He gave her until the first of the month to make up her mind, and stated that on the next Monday morning he would call to take her to her daughter's home. If she was not packed up and ready to go he would wash his hands of her, stop her old age assistance, and transfer her case to public welfare. The woman shrieked vituperations at him and chased him from the house with a flat iron in her hand. The next day he called the State visitor for advice and found she was on a vacation. He decided to wait and see what happened on the Monday visit. To his surprise he found a complete turn-about in her attitude. She was sitting on the porch, wrapped in coats and shawls, with a packed suitcase beside her. She entrusted the key of her house to him and requested him to pick the grapes for his own use. On the four mile ride to her destination she chatted volubly, declaring she was delighted to have a chance to get to daily Mass, and that she was anxious to see her grandchildren.

At Christmas time the State visitor called at the daughter's home and found a Mrs. S. she hardly recognized. For the first time in many years she had suffered no respiratory infections, and she was childishly proud of her pretty print house dress and clean white apron. She talked with great animation about returning to her home in April, but

deplored the necessity of spring housecleaning. The visitor offered to obtain the services of a WPA housekeeper to assist her. The suggestion was accepted with alacrity, and in April her daughter went to "B" and superintended the first cleaning the house had had in fifteen years! The resources of the St. Vincent de Paul Society furnished curtains and table covers, and bed clothing was obtained from the WPA commissary. The metamorphosis was startling. When Mrs. S. returned the first of May she was pleasantly astonished.

A revisit in August showed a distinct contrast from the visit the previous year, although evidences of "cluttering" were present. In November she made no protests when arrangements were made for her return to her daughter's home. It is doubtful if she can continue to live alone this summer, however, as a senile condition is rapidly developing. Her other eye is also gradually losing its sight, and a general physical break-up is in process. Probably she will be transferred to a nursing home in the spring.

The main problem here is in the area of housing, with complications due to chronic illness and lack of nursing care over a considerable period. The local visitor, in spite of lack of professional training, has done an excellent piece of social case work, which resulted in building up the client's morale by providing proper care in a new

environment.

Case 19. A widow, Mrs. A.S., aged 83, born in Medford and married and widowed in the town of "B" where she has lived since her girlhood.

She has four children, all married, and makes her home with the oldest daughter, who is comfortably situated. Although this daughter is a widow, her husband left her an annuity of $50 a month and an attractive home. She charges her mother no board, the $16 monthly grant being used for Mrs. S.'s personal needs.

She is the joint owner, with this daughter, of two cooperative shares.

The other daughters claim inability to assist, as they are dependent upon their husbands.

She has been affected with Bright's Disease for many years, and has frequent attacks of "shingles". In addition she is diabetic and has to follow a strict diet. A further complication is total deafness.

The $16 grant is allotted as follows: medical expense $12 (four calls a month at $2 a call, and insulin costing $1 a week); and miscellaneous expenses $4.

Here the problem is entirely medical. If. Mrs. S. were not a invalid aid would not have been requested. The local visitor has attempted no case work beyond seeing that palliative care is provided for by the cash grant.

Case 20. A single man, G.C., aged 68, born in Belmont and residing in "B" for the past forty years.

He lives alone in a large house owned by his brother-in-law. This is in poor repair and Mr. C. uses two sparsely furnished rooms. He pays no rent, acting as caretaker.

He applied for assistance in October, 1938, but aid was not granted until November because he had difficulty in getting his birth certificate. During this period he was forced to draw on his small bank account. The present balance is $25.61.

He has no other assets.

For many years he has been attending a clinic at a Boston hospital for elephantiasis.

A grant of $24 was made, deducting the item of rent. His budget, as drawn up by the local visitor, follows: food $13; fuel $5; miscellaneous expenses $4; and medical expense $2.

Here the essential problem is economic. Up to the time that the abnormality developed to such an extent that it interfered with his work -- about eight years ago -- he was a skilled artisan, conducting his own cabinet maker's shop. He used up most of his savings in an attempt to stop the course of the disease, and when he was compelled to sell out his business he moved into his sister's home. After her death his brother-in-law allowed him to remain in the dismantled home.

The economic problem is, of course, due to loss of employment because of an abnormal physical condition.

This is a comparatively new case and no real case work has been accomplished. The local visitor, however, has become interested in Mr. C. and hopes to be able to adjust the case in the spring by finding him some work to do. The State visitor suggested that the client's attention should be directed to the Harvard School of Tropical Medicine in an attempt to discover if his physical condition is a true

elephantiasis, and if so, to ascertain if treatment might be instituted which would either destroy the parasite or allay its growth.

E. Summary of causative factors

Because of the small number of cases under consideration, no attempt will be made to compare them statistically. While they may be deemed representative of most of the cases aided under old age assistance, any percentage figures would be of no statistical significance, and even generalities might be misleading. The most one can safely say is that apparently the primary reason for seeking aid is economic insufficiency, contributory causes being lack of savings, loss of employment, and loss of natural supporters. In lesser degree, medical and emotional problems are responsible for the old folk seeking assistance.

While the chart on the following page carries no statistical weight, it is included merely to show how several factors are involved in any particular case. The aim has not been absolute accuracy, but, rather, an attempt to show the basic and secondary problems at a glance.

Under the consideration of medical problems, it seems reasonable that chronic conditions should constitute the majority of illnesses found in the cases investigated, since the ages of the recipients are all above sixty-five, and in thirteen of the twenty cases presented the ages

PROBLEMS:	Cases in "A"										Cases in "B"									
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1. Economic --																				
a. Loss of employment					x	x		x		x	x	x	x	x		x	x			x
b. Loss of investments											x									
c. Loss of natural supporters		x					x		x	x				x			x			x
d. Refusal of children to support				x	x															
e. Installment buying	x																			
f. Lack of savings	x	x	x	x	x	x	x	x	x	x	x	x	x			x	x			
2. Medical --																				
a. General old age		x						x				x	x							
b. Illness - acute	x			x		x					x									
c. Illness - chronic		x	x	x	x	x	x	x			x				x	x		x	x	x
d. Lack of nursing care	x																	x		
e. Alcoholism										x										
3. Emotional --																				
a. Personal inadequacy	x													x						
b. Persecution complex								x	x											
c. "In-law" situations	x																			
d. Loss of morale	x							x	x		x			x						
e. Nervous tension								x	x		x									
f. Worry			x		x			x	x		x									
4. Housing --																				
a. Crowded conditions									x											
b. Unsanitary conditions																		x		
c. Lack of care	x	x				x												x		x

range from seventy to eighty-three. Alcoholism is encountered in a great many old age cases, and the fact that only one of the cases cited shows this as a cause is probably due to the chance selection utilized in this study.

The writer's experience would seem to bear out the belief that emotional problems are more prevalent in an urban center than in a small town where life is lived at a more even tempo. Frequently, where nervous tension is noted there is also evidence of loss of morale and worry. Possibly this is because individuals with highly geared nervous systems are more prone to lose their morale than the more stoical persons who "take things as they come".

Although poor housing enters into the picture somewhat, few applications are made primarily because of this. Crowded conditions and lack of care often complicate an otherwise satisfactory situation, and the ensuing problems are sometimes very difficult to solve.

In general, one might say from a comparison of the two communities, that old age assistance cases in an urban section seem to present more complex problems than those in a small town.

F. Results achieved

A glance at the accompanying chart on the next page shows that more case work has been attempted in the larger city than in the small town. This, of course, is probably

RESULTS:	Cases in "A"										Cases in "B"									
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1. Positive --																				
a. Employment	x																			
b. Palliative care						x												x		
c. Education of children					x															
d. Building of morale	x				x			x	x		x							x		
e. Release of tension								x	x		x									
f. Change in environment						x					x							x		
2. Negative --																				
a. Palliative care		x	x				x												x	
b. Education needed				x																
c. Attitude of local Board				x																
d. Insufficient investigation																	x			
e. Lack of case work				x			x			x		x	x	x	x	x	x			x

not surprising when one realizes that there are two full-time visitors in "A" -- a senior worker who spends her full time on old age assistance cases, and a junior worker who handles regular welfare cases, as well as aid to dependent children and some old age work -- and only one full-time old age assistance worker in "B". In addition, the workers in "A" have the use of a clerical assistant, while the worker in "B" must write up all his own reports and send out his own letters to children, employers, banks,and other sources of information. Furthermore, the head worker in "A" is a trained social worker, holding a professional degree from a nationally known school of social work, while the worker in "B" has had no technical training in social work. He was formerly a clerk in a shoe factory, although he has had an excellent business school education.

However, in only five of the ten cases chosen can constructive case work be noted in "A", and palliative work appears in two others. Definite lack of case work is seen in the remaining three cases.

In "B", we see case work attempted in only two cases, palliative work in one, and little or no case work has been tried in the other seven cases.

1. Positive results

The five cases showing positive results in "A" are, the writer feels, interesting enough to warrant a more de-

tailed analysis.

In Case 1, a foreign-born woman of sixty-seven, in poor health as the result of an acute respiratory infection and no nursing care, actually became partially self-supporting. She was a despondent and discouraged individual at the time she first applied for old age assistance, with the apathetic attitude of the person long inured to welfare relief. Two years later, she was exhibiting remarkable initiative in finding an outlet for her natural aptitudes as well as in disposing of her handiwork. The change in her morale was remarkable, as was the building up of a feeling of absolute adequacy and ability to cope with any situation. The results were undoubtedly due to the visitor's skill in determining the right moment in which to "read the riot act" to an emotionally overwrought and mentally perturbed client. Had the worker continued to help Mrs. H. out of one difficulty after another, this naturally capable woman would have become more and more dependent. Of course, the friendly worker-client relationship developed over a fourteen-months' period was necessary ground work. Additional case work was indicated in reference to the education of her children as to their responsibilities, but in the long run this omission was not detrimental, as she herself finally undertook to show them their shortcomings, first,by her own example, and secondly, by maternal lectures. The youngest boy, for example, who had been imposing on his mother's

negative good nature, collaborated with her by furnishing charming photographic studies of flowers and animals which she mounted in beautifully embroidered frames. As a result of this, his own business is beginning to show a profit as his reputation as a photographer of pets is growing. He is contemplating moving with his mother to a larger apartment where they will share expenses. Gradually, of course, as his ability to support his mother increases, her assistance will be decreased.

In Case 5, we find an elderly married couple, of excellent Scotch ancestry, naturally thrifty and independent, forced to seek public aid near the end of busy and useful lives. The husband, a skilled electrical worker, was obliged to give up his job following a cerebral hemorrhage, with resulting paralysis, shortly before he became eligible for an industrial pension. His long drawn out invalidism had used up a substantial savings account. This worry, augmented by an emotional tension induced by the unfilial attitude of their only son and the more tangible fear that the home for which they had worked and saved would be lost by a bank foreclosure, had created the situation that confronted the State and local visitors a year ago when the case was opened. The first case work attempted and accomplished was the working out of a satisfactory budget. This necessitated contacting the son and daughter to ascertain the extent to which they could assist. The daugh-

ter and her husband were most cooperative, but the son -- a lawyer who glibly announced his familiarity with the old age assistance law -- claimed inability to contribute any sum. Revisits to the home of Mr. and Mrs. A. developed an attitude of trust and confidence so that the old man felt free to discuss many questions with the visitor. The one subject on which he displayed any reticence was his son. Entirely by chance it was discovered that the son was minimizing his resources and ability to aid. The State and local visitors undertook to do some case work with the son, and by repeated interviews succeeded in changing his attitude. Not the least of the benefits derived with the therapeutic effect upon the father's health. Follow-up by the local authorities has convinced the young lawyer that social service is not "the bunk", as he had originally declared, but a constructive part of public welfare administration. He has expressed the desire, predicated on his continued success in "getting good breaks" in his practice, of relieving the old age assistance bureau of all responsibility.

Force and persuasion were utilized in Case 8 as the most efficacious case work techniques. The client, an intelligent, well-educated American of seventy-four, who lived with his wife in a small, attractive apartment, had been very successful until the advent of the depression. Accustomed to high standards of living and unable to main-

tain them on a depleted income, he had developed an emotional attitude bordering on the psycopathic. More than one plan of treatment was attempted. The first was to allow him to continue with his business until it became evident that he was getting more deeply in debt and becoming physically unable to carry on the rather strenuous commuting schedule involved. (Incidentally, the local Bureau was the recipient of much adverse criticism because of his daily visits to Boston.) Reasoning was next resorted to in an attempt to show him that financially his business was a liability rather than an asset. An increase in his allotment was tried, with the condition that he give up his employment. The State and local workers cooperated in solving this case, and the results more than justified the effort expended. The successful outcome was to a large extent due to indirect, rather than to direct, case work. Throughout the eight months' period of active adjustment, the greatest care was taken to maintain an apparently passive attitude, allowing Mr. M. and his wife to work out their own salvation. Even when persuasion was attempted, by suspending one of the regular semi-monthly checks, the visitors succeeded in making this mentally alert old man admit that the action was justified. It would have been very easy to have become too helpful, and even yet this danger exists. The case is not a static one, and the proper amount of follow-up must be determined in order to continue

the positive effects already attained.

In Case 9, the problem was essentially emotional, in that the fear of the stigma of pauperization had to be allayed. A spinster, seventy years of age, inordinately proud of the position her family has maintained in "A" for half a century, is determined to carry on the traditions in spite of her reduced circumstances. Every summer she moves to her "summer place" in Maine -- which, according to the report received from the assessors there, is hardly suitable for even summer occupancy -- and each fall she returns to keep up the pathetic game. The visitors, both State and local, had first to overcome her suspicious attitude and establish a relationship which would permit what she considered unwarranted "prying" into her personal affairs. The next step was to build up her morale, loosen the emotional tension, and bolster up her self-respect. Six months were required to convince her that the receipt of old age assistance in no way dimmed her family's glory; that it was, in fact, a confidential relationship known only to the members of the local Board, the State visitor, and herself; and that it did not make her a pauper. Another result achieved through case work was the improvement in her living conditions -- particularly in respect to using another room for her sleeping quarters and confining her day-time activities to the kitchen which had formerly sheltered her for twenty-four hours a day from September to

June of each year. The local visitor is continuing the good work accomplished by a friendly and sympathetic follow-up program, which has been made possible because of the fact that they are members of the same church.

One other case in "A" shows positive results. In Case 6, ill health and poor housing combined to create a serious situation, so that the plan of treatment is built around the ultimate goal of a change in environment. The client was a very old man, who had been known to the local visitor for over three years, and who had first applied because of purely economic reasons. At that time he was physically active and capable of caring for himself in the old farmhouse in which he had been born. About a year ago, however, he had been injured while chopping wood and was hospitalized for a short period. His convalescence had been spent in his son's home, the old age assistance grant being increased to cover the cost of his board and care. In the summer, he insisted on returning to his own home, and it was at this time that intensive case work was started in an attempt to arrange for his return to his son's home for the winter months. Repeated visits were necessary to bring about the desired results, and the successful solution of this case was due to the case worker's recognition of "timing" as an integral part of the interview of persuasion. Additional case work is seen in the successive changes in environment provided as his physical condition became worse. The present palli-

ative care arranged for in a nursing home is the only possible solution to the medical problem involved, and the case will probably remain in this static condition until the old man dies.

With reference to the ten case histories chosen from the old age files in "B", in only two cases was constructive case work attempted. In one, the State visitor did most of the actual adjustment; in the other, the local visitor did a creditable case work job, although a great deal of the adjustment was unplanned and the techniques utilized were not known to be "techniques" at the time.

In Case 11, we find a man and woman, both over seventy years of age, with a heritage of Swedish thrift and industry that had prevented them from asking for aid until the primary economic situation had been complicated by worry, strained nervous systems, and a complete let-down of morale. Even after the first application had been made by the old man, who was a skilled artisan, he managed to obtain sufficient work to discontinue for a time the small grant which had been given to supplement the amount earned by his wife, who did day work, and it was not until the old woman's health broke down that she applied. From the first contact with this couple, case work was attempted with a view to the eventual disposal of the little home which they had vainly struggled to salvage from the wreck of their hopes and plans, and on which the carrying charges were far in excess of

their combined incomes. When an accident incapacitated him for several months, they struggled along on her meager old age allotment, eked out by occasional odd jobs, but when the bank foreclosed, he was forced to reapply. Case work efforts were then directed towards reconciling them to the seeming loss of their life work, and re-establishing their self-respect in an environment from which all evidence of the cause of their dependency was removed. Nothing was accomplished, however, that the local visitor could not have succeeded in doing alone. That he did not is proof that trained workers are needed in public welfare administration.

In Case 18, a seventy-five year old American woman, of Irish descent, was successfully rehabilitated. Here the local worker did the initial work and arrived at a successful solution purely by chance, as he himself admits. A routine visit by the State worker had indicated that case work might be needed to effect a change of residence for the cold weather months, since the woman's home was not suitable for winter occupancy, being flimsily built, in a rather isolated section of the town. No plan was worked out, however, at that time, and when the fall came the local worker solicited the help of the woman's daughter, her physician, and the parish priest in an attempt to persuade her to move. All efforts proved unavailing, and the worker finally "got mad" and threatened suspension of aid with surprisingly good results. The woman capitulated without another word and

responded to all subsequent plans of treatment. The State worker assisted with suggestions for follow-up, using this case to explain that it was an excellent illustration of "case work".

The local visitor has since attempted similar rehabilitation with excellent effect.

Six types of positive achievement may be noted in these cases: employment, palliative care, education of children to their responsibilities, building of morale, release of tension, and change in environment. Usually a combination of one or more of these procedures is seen in any particular case, and such a case on analysis will undoubtedly show that case work skills of a high order have been utilized.

3. Negative results

In cases where no positive goals have been attained, analysis often indicates the need of case work. The writer has attempted to list certain "negative" results: i.e., palliative care, the need of education, the attitude of the local board of public welfare, insufficient investigation, and definite lack of case work. In some cases, of course, no case work is needed -- the basic situations are economic or medical with no apparent complications; in others, the client's family or friends may arrange to give the necessary palliative care; while in others, cash grants suffi-

cient to supply the material needs of the recipients are given and they have been allowed to work out their own problems.

In certain cases, however, definite lack of case work is seen. Two of the case histories cited will be briefly analyzed as illustrations.

In Case 4, the client, a man of sixty-six, applied for assistance because of a particularly unpleasant medical problem with which his own children claimed inability to cope because of their own straitened circumstances. Investigation showed that one son could assist and the man's aid was reduced to supplement the money that this son should provide. For some time previous, the son had assumed a "chip on the shoulder" attitude, repeatedly daring the local bureau to refuse the minimum grant of $30 a month, and when they did so, he immediately appealed the case in the old man's name, moving him to a nursing home where the rate was $10 a week. On receiving a favorable decision from the Appeal Board, granting $30 a month and medical care, the son transferred his father to a private nursing home where the board was just $30 a month. Later, when the old man's physical condition became so serious as to warrant nursing-home care at $65 a month, the local board refused the increase stating that the Appeal Board had granted $30 a month and that must suffice. The local board is, of course, at fault in maintaining a vindictive attitude and in refusing

to work towards the son's education as to his responsibility both to his father and to society.

In Case 17, we find three old age recipients living under one roof with another and older person who rules the other three like a tyrant. The problem is far too complex for the unskilled local worker to solve. The family situation is involved and the thread of suspicion and evasion that runs through the picture cannot be ignored. The reticences of all three clients in the home must be pierced by understanding and sympathy. Case work of a high standard is indicated, but the trained State worker cannot give an unfair proportion of her time to this case. She has repeatedly made suggestions to the local visitor, but,in view of his newly aroused interest in case work, has hesitated to "tread on his toes".

The writer feels that these two cases present an interesting contrast. In the first, no case work has been done although the worker in charge is well trained and fully able to make an adjustment; in the other, no case work was attempted, primarily because the worker does not possess the necessary skills and techniques of social work.

Nothing derogatory is intended by the continued allusions to the lack of training of the visitor in "B". He has been doing a remarkably complete and well integrated job with the natural attributes he possesses. The State worker has found him an apt pupil and his decisions have

all been scrupulously fair to the recipients.

3. CONCLUSIONS

From a perusal of the twenty cases which have been presented and discussed, it would seem patent that case work is an integral part of public welfare administration -- and that the field of the indigent aged offers many opportunities for constructive action.

A. Case work from the local visitor's viewpoint

From the viewpoint of the local visitor the area of participation presents wonderful possibilities for service. Even though it may be acknowledged that a case load of from two to three hundred, or more, is clumsy to work with, nevertheless, as much of the follow-up procedure is purely routine it would seem that in the comparatively small proportion of "problem" cases much constructive work is possible.

The "fly in the ointment" is the present set-up -- the local worker is also intake clerk, stenographer, bookkeeper, settlement clerk, and investigator. Every case involves some two days of clerical work. Letters must be written to banks, to children, to children's employers, to places of previous residence, and, in all too many cases, to the place of birth for verication of age and citizenship. On Board meeting nights more clerical work is needed in preparing cases for consideration, and the following day is spent in writing to recipients in instances where a change in the disposition of a case has been made.

In some towns, where the old age assistance is also the public welfare office -- although theoretically this is forbidden by the State department policies -- it is almost impossible to concentrate on office work on the day set aside for the taking of applications by the visitor. Again, when the State visitor comes bustling in looking for information -- pulling out folders to check essentials, and questioning this and that supplementary grant to cover necessary extras -- the local worker must chalk up another day to "loss" rather than to "profit".

Again, the local visitor who is not protected by Civil Service is at the beck and call of every politician in the district. This is not conducive to efficiency. Recently, the writer was talking to the visitor in "B". He has been seriously considering filling in the gaps in his training by attendance at a professional school of social work. He is a conscientious, business-like young man who, although in the field of social work by chance rather than by vocational planning, nevertheless finds it so congenial that he would like to make it his life work. Shortly after his appointment as a visitor, he married. Naturally, the expenditure of a considerable sum of money for tuition is the subject for serious thought -- especially when there is the very grave possibility that a change in the Board of Public Welfare will occur at the next town election, and he will find himself without a job. Such insecurity is a source of

worry -- and a social worker who is himself haunted by the spectre of unemployment cannot be a good social worker.

Moreover, under Civil Service, minimum standards can be maintained and trained workers can be procured for the same salary than an unskilled worker demands. To be sure, there are many evils under the present Civil Service régime -- the very feeling of security that makes for good work can also act as a cloak for very slip-shod service. But the advantages far outweigh the disadvantages.

Another handicap of the local visitor is the very fact that he or she is "local". Recipients often resent the necessity of telling intimate family situations and revealing discreditable family skeletons to a man or woman whom they have known since childhood. This has been demonstrated to the writer by a situation that arose in "A" within the past year. The local visitor was subjected to a rather nerve-racking ordeal when she was called upon to investigate a situation involving a neighbor, who immediately cried "Discrimination!" when the application was rejected because of confidential information known to the worker. Political influence was brought to bear on the visitor, and a serious situation was averted by the championship of the local Bureau.

The fact that the visitor is on the scene twenty-four hours a day is an asset, and this should make for a high standard of investigation and achievement. Case work is so

dynamic that the situation may vary from hour to hour as well as from day to day or month to month. A family with a sufficient income today may be reduced to absolute penury tomorrow, and conversely, a penniless man or woman this morning may inherit a small fortune next week, or sell a "white elephant" of a house the week after at a good profit. "Need" is an elusive and transitory state of affairs at times. The local worker cannot minimize the importance of being in close and continuous contact with recipients. Moreover, a friendly and cooperative attitude between worker and client can break through reticences and unearth many pertinent facts that color a family situation.

B. Case work from the State visitor's viewpoint

Any social worker would prefer to be a case worker than a detective or an auditor. The State worker finds that the present set-up prohibits the actual practice of much intensive work of this sort, and imposes, instead, the necessity of constantly checking up on the activities of the local Bureaus.

A first visit is mandatory, and attempts to adjust difficult situations must be made on that visit -- unless the case is so complex and acute that common humanity dictates additional action immediately. The State visitor should report cases needing adjustment to the local visitor, confer with him regarding possible solutions, suggest workable

methods of precedure, and check on follow-up activities. But even this first visit is unnecessary as the situation now stands. Trained personnel in the local Bureaus could do the investigation necessary in all cases, and utilize the more skilled techniques of the State workers only in those cases which call for interpretation of the problem to the client and to the members of the Board. This would do away with much of the duplication which now exists and would release the tension and antagonism which often disorganizes the State-local Bureau interaction. With relation to this phase, a great deal of the criticism heard from local workers is justifiable; duplication of effort does exist. Very often the State worker will send a recommendation to the local Bureau calling attention to the shortcomings of the local visitor. The function of the State worker is not that of a policeman, as this would indicate, but,rather, that of a consultant and teacher. A friendly word of advice will accomplish far greater reforms than a censuring letter will. The State worker can, and should, be called in for consultation and suggestions when perplexing situations arise.

Private agency workers stand aghast when a public agency worker glibly states: "I have a case load of two thousand, on which, theoretically, quarterly visits should be made. Practically, however, one visit is all that can be managed each year." A little mental arithmetic on the

part of the listener proves that even one visit a year is impossible! An average of six visits a day for five working days a week, for forty-eight weeks a year, totals fourteen hundred and forty visits a year, so each year the worker is five hundred and sixty cases behind schedule! And if one deducts the multiplicity of visits that must be made on those cases where intensive work is indispensable, the number of unvisited cases increases by leaps and bounds. Other factors which cut down the total number of visits are: the taking of settlement histories, the clerical work incidental to the writing-up of case histories, reports, and the obtaining of data which may be needed in determining a solution or even in proving the eligibility of the applicant or the existence of need, and particularly the auditing and supervisory work which takes place in the local offices.

The function of the State visitor should be that of a liaison officer between the State, the local authorities, and the recipients. Difficult cases should be referred to the visitor for settlement -- subject, of course, to decisions made by the head workers in the central office. This would undoubtedly tend to establish rapport and increase efficiency.

The importance of trained personnel in State service is very important. Knowledge and skill is necessary "to unlock this store of productive ability (i.e., the influencing of human behavior), to turn it into industry, thrift, creative

art, and citizenship."[1] The task is not a simple one and special equipment is required. Although Mary Richmond admits that "any intelligent person, without previous training but with tact and goodwill, could have done the same things"[2] (that is, the services which case work requires), she modifies this by the statement that "trained skill was shown in the combination of these itemized acts, which no untrained person, however intelligent, would have achieved."[3]

The private field has long recognized this fact and the quality of its work proves the soundness of this viewpoint. The same high standard of work is coming to be demanded in public service. The sooner the "powers that be" become cognizant of this, the sooner will the public approve the imposition of adequate standards in personnel, with a reduction in the cost of administration in the long run.

C. Tentative suggestions

That improvement in the present system is needed is evident. The writer has selected a few points where the need for correction is most patent, and has essayed to suggest pertinent revisions.

With respect to the local Bureaus: first, adequate

[1] Todd: The Scientific Spirit and Social Work, p.200.
[2] Mary Richmond: What is Social Case Work?, p.101
[3] *Ibid.*, p.102

personnel should be provided. In any community where the case load numbers one hundred or more, there should be an intake clerk, or receptionist, who is qualified to give correct and authoritative information to applicants seeking it, and to assist these old men and women efficiently in making out applications for assistance. There should be a full-time investigator who is skilled in social work techniques and who is thoroughly conversant with the law and the officially accepted interpretation of its provisions. There should be adequate clerical and bookkeeping facilities, and there should be suitable quarters for interviewing applicants. This last cannot be stressed too strongly. No stigma of pauperization should be attached to the receipt of old age assistance, and applicants should not be exposed to the glances of the curious when they are giving the local workers the essential data requested and required.

Furthermore, the protection of Civil Service should be available to all municipal employees, and the imposition of minimum standards governing training and education should be mandatory, or at least the substitution of several years of actual experience in place of technical training should be required. In this connection, provisions should be made for opportunities for professional training.

Naturally, no worker should carry a case load that is unwieldy and prohibits proper investigation and follow-up of individual cases.

Finally, a feeling of cooperation between State and local workers should be engendered. Neither should be suspicious of the other, and suggestions should be given and received on an equal basis.

From the standpoint of the State department, duplication of effort is the first thing to be remedied. Home visits should be discontinued except in those cases where the local visitor requests State participation in working out a plan of action or where State intervention has been sought by the recipients. In cases of disputed settlement the State worker might contribute valuable suggestions.

The function of the State worker should be restricted to consultation and supervision in the greater number of cases submitted by the local visitor to the State visitor, and to interpretation of the State policies in all other cases.

Much might be written about the establishment of district offices, but the writer is purposely omitting this aspect of the situation, as well as any discussion of the proposed changes regarding the consolidation of the various categories of relief in Massachusetts. This could be made the subject of a separate thesis, and so does not fall within the province of this paper.

That case work should be a recognized part of the services offered by a public relief giving agency cannot be denied. It is necessary in all cases where aid is given --

and the field of the aged requires as much case work as any other branch of relief, if not more. To be sure, the majority of cases demand little or no intensive work, and under the present set-up little constructive work can be done even in those cases requiring it. The visitor can, however, try to discover any hobbies the old folk may have and foster their development. Even though regular, full-time employment is not permitted, frequently the visitor can allow an active old man to do an occasional "odd job" or an industrious little old lady to sell a braided rug, merely to encourage them and to give them an incentive to "carry on".

Clients are quick to respond to a friendly attitude on the part of the visitor. They grow to look for the local worker's regular revisits and usually have an example of their handiwork to display. Those who have no outlet for self-expression also apparently appreciate the interest of the visitor. Of course, there will always be the minority who maintain a defensive and suspicious attitude and with whom contact never progresses beyond the mere asking and receiving of information.

Results are hard to evaluate, as the work accomplished in even difficult cases is primarily palliative. The visitor can insist that the client be adequately housed, fed, and clothed -- that medical care be provided and fuel furnished. He, or she, can only attempt to give the client an

interest in life and to make the journey from sixty-five to the grave a little easier to travel.

But -- it can be done! And humanity demands that it should be done. What will be accomplished rests on the shoulders of the workers already in the field and those who are training themselves for future service. The challenge is there; it must be met. Case work is not only indicated in work with the indigent aged -- it is an absolute essential.

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